1. Summary

1.1 Project Title	LEADS in a Caring Environment Framework Refresh
1.2 Project Duration	24 Months
1.3 Number of Internship Units	6
1.4 Total Project Value	$120,000.00
1.5 Keywords	LEADS, Capabilities, Healthcare, Healthcare Leadership Competencies, System Leadership, Leadership
1.6 Funding Model:	Elevate Standard Funding ($60K/year)

1.7 Project Description

Public Project Overview

The intent of this action research project is to refresh the LEADS in a Caring Environment capabilities framework with the best and most current knowledge of leadership's leading practices worldwide and in the literature, which are consonant with Canadian values, beliefs, and structure. The project will also review the current content of the Canadian LEADS in a Caring Environment capabilities framework and ensure its language reflects the research-based leadership capabilities so identified to begin ensuring that evidence becomes linked to practice and policy, and sustain and grow the existing support for and use of the newly refreshed LEADS framework by health organizations and individuals within the Canadian Health System and, where applicable, internationally. We envision three major values to the healthcare industry in Canada and, through its efforts, the broader health of the Canadian population. They are (1) a common vocabulary for describing leadership in healthcare; (2) stimulating inter-professional and inter-organizational leadership development efforts that reduce redundancies of effort and maximize financial efficiency; (3) describing a set of standards and expectations for the practice of leadership that inform accreditation processes, human resource practices (i.e., learning plans, performance accountability).

Research Abstract

The Canadian College of Health Leaders (CCHL), the Canadian Health Leadership Network (CHLNet) and LEADS Global seek to refresh the LEADS in a Caring Environment leadership capabilities framework with the best, most current knowledge of leadership's leading practices worldwide and in the literature. LEADS is widely used in healthcare in Canada as a unifying foundation for leadership development. Using action research methodology and purposeful sampling, and in recognition of quality work already done in many health organizations related to capability development, research participants will be drawn from diverse, experienced LEADS users, authors and scholars. Multiple methods such as a literature review, individual and group interviews, Delphi discussions, surveys, focus groups and large group methods will be used to inform changes to the LEADS framework. A 12-member Working Group of practitioners and academics provide guidance and expert input into project activities. The project will result in a) continuation of a common vocabulary and expectations of leadership, b) a current evidence-base for effective leadership practice, c) stimulation of portability of leaders across Canada, d) knowledge sharing, e) inclusion of diverse groups and f) an outcomes focus and conceptual framework for the design of leadership development initiatives in different professions, organizations, and contexts.

1.8 Participants

Academic supervisor	Academic Institution	Department	City and Country
Zoe MacLeod	Royal Roads University	Professional and Continuing Studies	Victoria, Canada

Partner Contact	Partner Organization	Legal Status	City and Country
Graham Dickson	LEADS Change Consulting Ltd.	For Profit Canadian Private Corporation	Victoria, Canada

Kelly Grimes	Canadian Health Leadership Network	Not for Profit Canadian Corporation	Nepean, Canada
Brenda Lammi	Canadian College of Health Leaders	Not for Profit Canadian Corporation	Ottawa, Canada

Postdoctoral Fellow	Academic Institution	Department	City and Country
Phil Cady	Royal Roads University	Professional and Continuing Studies	Victoria, Canada

2. Description of proposed research

Please refer to the Writing Your Elevate Proposal Guide to assist you.
IMPORTANT: When filling in the proposal, please make sure to follow the format provided. Changing or modifying the format provided may result in your application becoming ineligible.

2.1. Background and review of relevant prior work:

Describe the nature of the problem to be addressed and why it is important; this may include current gaps in research and how these gaps may be addressed in your project. Please include a description of how the project draws on knowledge gained from previous research. (Recommended 1 page, exclusive of references)

Context. LEADS Global, the Canadian College of Health Leaders (CCHL), and the Canadian Health Leadership Network (CHLNet) (collectively the "Steering Group") propose updating the LEADS in a Caring Environment (LEADS) capabilities framework to address evolving healthcare leadership needs, emerging scholarly evidence and democratic and social justice issues. Developed in 2006, the LEADS framework is used by 80% of Canadian health organizations for leadership development. Given recent challenges such as the COVID-19 pandemic, demands for reform, climate change, AI, social justice, clinician retention, and an aging population, a refreshed framework is desirable. The Steering Group, consisting of the original LEADS researchers (Leads Change), organizations and current LEADS users, have entered into an agreement to conduct a thorough review of the evidence underpinning the framework and to engage in a conversation with health leaders across Canada, to determine what a 'refreshed' framework, able to meet today's Canadian healthcare system challenges, should look like. A 12-member Working Group drawn from academics and practitioners across Canada, as well as EDI representatives, has been established to oversee this project and to provide guidance as required.

About LEADS in a Caring Environment Leadership Capabilities Framework. LEADS offers a tailored "By Health, For Health" approach to enhancing health leadership capacity in Canada (Dickson & Tholl, 2020). It includes five domains—Lead Self, Engage Others, Achieve Results, Develop Coalitions, and Systems Transformation—each with four core capabilities, totalling 20 capabilities essential for health leaders.

LEADS is widely used in Canada for leadership development, aligning health professionals and administrators through a shared language (Dickson & Van Aerde, 2018). The framework is continuously updated based on current research but must be adapted to fit specific health systems and cultural contexts. For example, Health Workforce Australia adopted a version of LEADS in July 2013, acknowledging that leadership practices vary by country while maintaining core principles (House et al., 2014).

CHLNet, CCHL, and LEADS Global have been pivotal in promoting LEADS both in Canada and internationally (Tholl, 2014). The framework stems from a comprehensive literature review and pilot projects across Canada, validated through academic evaluations and practical applications.

2.2. Proposed research:

Describe the project objectives, proposed methodology, experimental design, and the novelty of the approach or application. (Maximum 3 pages of text, exclusive of references and images, etc.)

Project Aim and Objectives. The intent of this project is to refresh the LEADS in a Caring Environment capabilities framework with the best, most current knowledge of leadership's leading practices worldwide and in the literature, which are consonant with Canadian values, beliefs, and structure. The three objectives guiding this project are:

1. To articulate, in a simple yet cogent (*defn: strongly and clearly expressed in a way that influences what people believe*), accessible and concise manner, 21st-century healthcare leadership practices and capabilities that are based on empirical, experiential and emerging evidence.
2. To review the current content of the Canadian LEADS in a Caring Environment capabilities framework and ensure its language reflects the research-based leadership capabilities so identified, and to ensure that evidence becomes linked to leadership development, practice and policy.,
3. To sustain and grow the existing support for and use of the newly refreshed LEADS framework by health organizations and individuals within the Canadian Health System and, where applicable, internationally.

Research Question and Sub-questions. Developed using Berger's (2012) approach to framing questions for innovation activities, the project research question is, *"How might we adapt or re-constitute the LEADS in a Caring Environment capabilities framework to reflect the qualities of outstanding health leadership needed to address emergent and ongoing challenges within Canada's 21st Century health system?"* The sub-questions guiding this project are:

1. Current State: Based on research evidence are there changes that need to be made to the current content of the LEADS framework in order to describe the leadership qualities needed to address the multiplicity of health system

challenges that have emerged since 2019 (e.g., social justice, diversity and inclusion, wait times, climate change, and a health human resources crisis)?
2. Future State: What suggestions do practicing leaders have for changes to the LEADS framework in order for it to be relevant to those challenges and endorsed by diverse communities?
3. Challenges: What challenges might we encounter in attempting to move to the future state (for example, how willing and able are the users of the LEADS framework to make changes to their practices (leadership development), performance management, selection of leaders, succession planning) if a 'refreshed' framework is developed)?
4. Strategies: What timeline, strategies, and tactics are recommended to help users, nationally and internationally, deploy a 'refreshed' framework effectively?

Participants. Consistent with the proposed methodological orientation (see below), some participant characteristics are currently known, and some are yet to be identified through consultation with the LEADS refresh Working Group. At present, the purposeful sampling criteria for inclusion in this research are that participants must be experienced users of the LEADS framework within the past five years or authors/scholars in the leadership field. Participants will be recruited from:

- Leaders of Canadian healthcare organizations (from emerging leaders to executive leaders)
- Academics who study leadership and change in the Canadian health system
- Working groups of CHLNet, CCHL and LEADS Global
- Internal organizational and leadership development consultants and Human resource practitioners
- LEADS Change, and LEADS Global facilitators and learning program participants

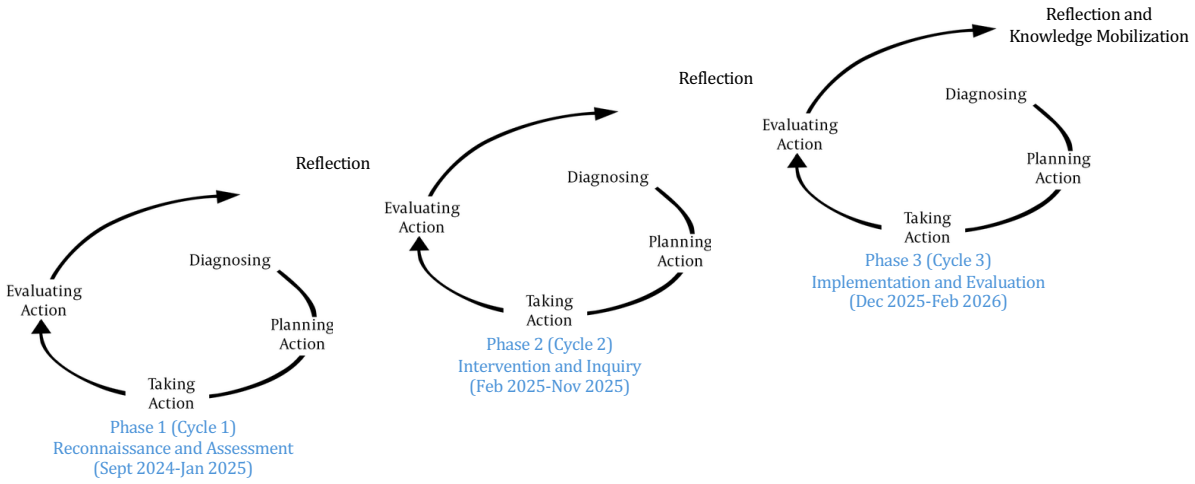
Ethical Considerations. Ethical reviews and oversight will occur through Royal Roads University. This research will adhere to the ethical principles outlined in the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, & Social Sciences and Humanities Research Council of Canada, 2022), upholding the principles of concern for welfare, justice, and respect for persons.

Participants will be informed of their right to withdraw from this research in the research invitations, information letters, and during each data generation method. Data will be stored on a password-protected computer in the researcher's home office and backed up to a physical hard drive. All survey systems and software used for data analysis will be stored on Canadian-based servers. If, for some unknown reason, data must be stored on servers in the software host country and not in Canada, participants will be informed before providing their free and informed, ongoing consent to participate.

Methodology. Given the expansive and adaptive nature of this project, an action research methodology is most suitable. Researchers argue that an adaptive approach indicates quality in transdisciplinary qualitative research (Wickson et al., 2006). Action research combines rigorous data collection ('research') with change ('action') elements (Piggot-Irvine et al., 2011; Sankaran & Dick, 2024). Sankaran et al. (2009) describe it as "a process of collaborative enquiry carried out by people affected by a problem or concern, often using a cyclical process to increase their understanding of the real problem before moving towards a solution" (p. 181). This cyclical approach (planning, acting, reflecting, and evaluating) is supported by contemporary action researchers and focuses on organizational and community improvement (Robinson et al., 2021). This approach allows the project to a) adapt to health sector conditions, b) enhance the quality of results through a collaborative research process, and c) create and share new knowledge broadly. Approriately designed, it is also resonant with a 'decolonized' approach to community capacity buiding (Lepore et al, 2021).

The research will proceed in three phases of action research (Figure 1), guided by a Working Group of 12 participants (6 high-volume or licensed LEADS users, 4 academics, and 2 appointees), reflecting diverse perspectives and experience. All data collection methods will be pilot-tested with the Working Group before each phase.

Figure 1
LEADS Refresh Phases of Research as Cycles of Action Research. Adapted from Coghlan (2019) and Coghlan and Brannick (2014).



Phase 1 (Cycle 1): Reconnaissance and Assessment. The purpose of Phase 1 is to assess the current state of the LEADS in a Caring Environment leadership capabilities framework, i.e., to answer sub-questions 1 and 2. The COVID-19 pandemic has given rise to numerous significant social priorities, e.g., social justice, diversity and inclusion, and a health system that is struggling to be relevant to changing populations and challenges.

Literature Review. During Phase 1, we plan to conduct a comprehensive literature review of healthcare leadership findings, conclusions and recommendations from healthcare agency public reports, specially commissioned reports, and institutional reviews mapped against the LEADS framework domains. We will also conduct a review of both gray and peer-reviewed published sources regarding healthcare leadership and leadership development needs and opportunities, particularly during the period of 2019-2024.

Consistent with action research practices (e.g., Cornish et al., 2023), we propose to engage the Working Group to develop questions to help focus the literature review based on their expert input. We anticipate exploring scholarly articles, journals, and briefs from experienced LEADS users guided by such questions as:

- What does the literature since 2019 suggest in terms of leadership practices that are either similar to or different from the existing LEADS capabilities?
- When one reviews various reports and studies about the scope and breadth of needed change within Canadian healthcare, what leadership is required for a successful transition from the current to the future desired state?
- Who and where should the leadership come from in order for those challenges to be successfully addressed?

Data Generation: Participants will be recruited in consultation with the Working Group and Steering group partners. We anticipate that in addition to the literature review, reconnaissance and assessment will be undertaken through such methods as:

- Key informant interviews with Steering Group and Working Group members, healthcare leaders (from emerging to executive leaders)
- Delphi method with Canadian scholar-practitioners and authors
- Focus groups of leaders at existing conferences (e.g., CCHL Conference, Canadian Society of Physician Leaders' Leadership Forum, International Leadership Association, the World Health Leadership Network, Health Leadership Conference, and others as they are published)
- A brief qualitative survey of Steering Group organization members.

Methods to include diverse and/or communities of interest. Without a deliberate process to gather input from diverse ethnic and gender-based groups, there is a risk of perpetuating a 'colonizing' approach (Lepore et al., 2021). While global research highlights common leadership qualities (Dickson et al., 2012), their expressions vary culturally. LEADS should reflect these qualities and encourage groups to describe their practices.

Data collection must:

- Actively involve representatives from user communities with support from the diverse Working Group.
- Employ culturally sensitive methods, consulting relevant Indigenous and health research representatives.

Data Analysis and Transition. We propose to collaboratively assess and analyze the data generated. The analysis will primarily involve the Working Group using software such as NVivo and emerging Artificial Intelligence tools. We intend to conduct a thematic content analysis of the two sources in Phase 1 data and then triangulate them to seek key themes or ideas that need to be further investigated in Phase 2. During this cycle of action research, we will also engage the Working Group to

determine if additional knowledge mobilization products, such as interpretation bulletins, are required as intermediary steps between Phase 1 and Phase 2. Lastly, the Working Group will collaboratively develop questions to guide Phase 2.

Phase 2 (Cycle 2): Intervention and Changes to LEADS. As adaptation, collaboration, and consultation are key methodological underpinnings of action research as used in this project, the second set of questions to guide Phase 2 will need to be determined by the Working Group. We anticipate such questions as:

- Based on congruent themes identified during our triangulation process, are there suggestions for re-wording or re-constituting the content of the LEADS framework?
- Are there differences between the two data sets that create questions that need further exploration?
- Which methods are most appropriate to answer the questions emerging from those differences?
- Which additional health system participants should we engage in this phase?
- Based on the interim analysis, are there suggestions for re-wording/re-constituting LEADS content?

The Working Group members will establish a process to ensure a rigorous review of data generated in this phase. It is possible, for example, to create five sub-working groups—one per domain— that could review material gathered to this point and make recommendations to the Working Group for any changes—if any—to the LEADS framework. At this stage, we anticipate generating a summary of findings in an interim Phase 2 report and using it to guide Phase 2 engagement.

Phase 3 (Cycle 3): Implementation and Evaluation. The third set of questions to guide this cycle of data collection will need to be determined by the Working Group and be consistent with the methodology. We anticipate such questions as:

- How significant are proposed changes to the LEADS Framework (if any) from the perspective of requiring changes in its usage (i.e., leadership development, succession planning, etc.)?
- Based on the significance of those changes—if any—what supports should be provided, and what timeline should be employed to ensure users are able and willing to make those changes?
- What is the multiplicity of knowledge mobilization products that should be revised due to the refresh?
- How should we help communicate framework changes to the health system and the many healthcare organizations that employ, or might employ, the LEADS framework to improve leadership practice?

Data collection should be minimal as the purpose of Phase 3 is to engage people in validating/non-validating proposed changes to the LEADS capabilities and creation of knowledge mobilization products. Recommendations for change would then be workshopped at the same set of conferences used in cycle 1 for feedback from the broader system. We also anticipate a second Delphi method at this Phase, to obtain critical feedback on the proposed changes. Final decision(s) as to changes to the framework will be finalized by the Working Group and agreed upon by the LEADS Framework Steering Group. The final reflection and knowledge mobilization process will occur once the changes to the framework capabilities have been approved. We anticipate that the Working Group and volunteers will write a third book, Bringing LEADS to Life—A LEADS Refresh. We also anticipate that other academic articles will be commissioned as the opportunity presents itself.

Proposed Research: Novelty. We hope this research ensures the LEADS in a Caring Environment framework continues to provide a common vocabulary and leadership expectations across the Canadian health system, offering a modern, evidence-based foundation for effective leadership. Refreshing LEADS to address post-pandemic social and healthcare issues elevates leadership practice to meet new challenges. This research could also enhance leader mobility across Canada and create opportunities for knowledge sharing, programs, and resources to meet the leadership development needs of 21st-century health leaders.

1. It supports equity and inclusion by providing diverse groups with culturally non-specific leadership expectations.
2. It offers an outcomes-focused framework for designing leadership development initiatives across professions, organizations, and contexts.

2.3. Project milestones and timeline:

Indicate on a per-month or per-quarter basis when key research or development objectives will be achieved. Provide a detailed description of objectives and activities for the whole duration of the fellowship. We suggest using a Gantt chart to provide a timeline showing which task will be done when to achieve each objective.

Action research, as a methodological orientation, is responsive and adaptive to the emerging needs of the community of participants involved (See, for example, Oberschmidt, 2022; Trist, 1976), highlighting the methodological relevance to this research. Due to the adaptive methodology, consistent with Wickson et al.'s (2006) assertion that an adaptive and evolving methodological orientation indicates quality in qualitative action research, a broad timeline is offered below. It will be regularly updated in response to the input and direction of the Working Group and Steering Group partners.

	Sep 2024-Jan 2025	Feb 2025-Nov 2025	Nov 2025-Feb 2026

Phase 1	X		
Phase 2		X	
Phase 3			X

2.4. Expected deliverables:

Each project requires the submission of a completed Mitacs Final Report and Mitacs survey at the end of the project. Please also detail the additional expected deliverables of the project, i.e., expected outcomes, results, documents (peer-reviewed journal, conference presentation)

The working group will be consulted quarterly to determine knowledge consolidation and mobilization strategies. We anticipate that this project will result in numerous deliverables and knowledge mobilization mechanisms, namely:

- A contemporary, revised LEADS in a Caring Environment capabilities framework incorporating the skills and abilities required in the context of contemporary social, economic and industry-related leadership issues and concerns.
- Revision of internal leadership development programs and services within the many health authorities, professions, and organizations currently using LEADS for developmental purposes or human resource and talent management.
- A research report of process findings and recommendations.
- A revised brochure and support materials for LEADS users.
- Conference workshops both to engage research participants and to present findings.
- Social media elements such as LEADS-related vignettes, sketch notes, animations, tweets, and sharable, bite-sized content, which may be used for both learning and marketing.
- Publications and conference papers.
- A PowerPoint summary of the overall process and output for use by partner organizations as needed.
- Book: A Third Edition of Bringing Leadership to Life (Second Edition; see Dickson & Tholl, 2020).

2.5. Applicant statement:

Does the fellow agree to participate in all the expected R&D management training activities provided through the Elevate program?

☒ Yes ☐ No

Describe why you would be a suitable candidate for a Mitacs Elevate fellowship. Consider including career goals and how this fellowship may help you achieve them, your commitment to the professional development and training offered by the Elevate program, any relevant experience, positions, or achievements that demonstrate your suitability for the program, and why you are interested in applying for Mitacs Elevate. (Maximum 1 page)

Several fundamental critical success factors for this project are (1) engagement of the health sector in providing evidence to suggest refreshments to the LEADS language (i.e., capabilities, not domains); (2) the use of an action research approach to ensure that the research that is done is valid, reliable, and responsive to the true needs of the health sector; and (3) the acquisition of enough resources to enable a project team to carry out the ambitious program. The LEADS framework has a tremendous unifying power, and there is goodwill among the practitioner community for this refresh to happen. The time is right for focused adaptations to the framework to address the myriad social issues confronting health leaders and employees alike.

From a researcher's perspective, the researcher completed his doctoral studies in the Doctor of Social Sciences program at Royal Roads University in 2020. His area of research was in "Leadership and Decision Making in Complex Healthcare Settings," for which he received both the Chancellor's Award for Outstanding Dissertation and the Governor General's Gold Medal Nomination for outstanding research. Participating in this research project would be a logical extension of the foundational expertise developed by the researcher during the course of his studies. In addition to holding a Master of Arts in Leadership degree, the PDF researcher also has a 30-year history of leadership development research, practice and consulting in healthcare and other settings, making for an inspiring, informed project researcher.

The PDF is deeply connected to many healthcare and leadership networks through academic and professional activities. As an adult educator, facilitator, and action researcher, the researcher will share lessons learned in relation to both the substance

of this research and the process of enacting it. As a 'pracademic,' blending theory and practice will continue to be a passion that fuels generative conversations and an orientation to possibility throughout the conduct of this project.

2.6. Interaction:

a. Indicate the percentage (%) of time during the project that the fellow will spend on-site at the partner organization's location and at the academic institution(s). Research should be carried out equally (50%) in the premises of the partner organization and the academic institution(s).

(1) Partner interaction:

Interaction % at partner organization location	__50_ %
Interaction % at academic institution	__50_ %
TOTAL (must equal 100%)	100%

(2) If the research is not carried out equally (50%) at the premises of the partner organization and academic institution(s), please include a justification. NOTE: The minimum interaction at either site is 25% with a maximum of 75%.

b. Partner organization interaction.

(1) Provide a detailed description of the activities that will be performed on-site at the partner organization and the expected interaction with and supervision by employees of the partner organization.

(2) Describe the setting in which the fellow will be supported. Indicate (1) information about facilities available at each location, (2) where these facilities are located, (3) the resources the partner organization will provide to support the fellow's work at their premises, and (4) who the fellow will have direct interaction with at each location.

All three partner organizations are structured with relatively small physical offices and space and operate largely in a virtual or geographically dispersed manner. The partners and the post-doctoral fellow are also geographically distributed across Canada. Similarly, Royal Roads University is a blended institution with physical and virtual departments, courses and administration. The post-doctoral fellow also operates his consulting and researching practice in a virtual and distributed manner.

We anticipate that the vast majority of interactions will be virtual in nature except when convenient or when circumstances permit in-person interactions (for example, focus groups at conferences, meetings with the academic supervisor and LEADS Global in Victoria, and large group research engagement sessions). Indeed, the development of this proposal has been through numerous in-person and online meetings on a weekly and sometimes daily basis. In this environment, email, video conferencing, messaging, and other contemporary means of communication are the norm. As such, the "relationship" as a structural element of this social system is a proxy for a physical space for interaction. This is consistent with emerging scholarship in the area of systems thinking and systems leadership (see, for example, Cabrera & Cabrera, 2015).

With the caveat of not yet having the Working Group's input on preferred meeting times and structures, we anticipate ongoing interaction between all parties on an ongoing, as-needed basis. Having said this, the Working Group terms of reference prescribe quarterly group meetings, and the Steering Group partners have provided free and open access to them for consultation and engagement on an ongoing basis while respecting the need for independent project work and production.

As indicated in the budgeting portion of this application, and with respect to material and equipment needs, all expenses related to admin support, technology access, Working Group meeting costs, etc., are provided by the partner organizations as they have those resources in-house. Additional research support—i.e., to operationalize the Delphi component of the study--will also be provided as in-kind contributions from those organizations. The only additional needs are associated with the costs for travel, accommodation, and meals in support of whatever travel is required by the intern to attend partner meetings; and

the partner organizations will cover those expenses. Royal Roads University's office of Professional and Continuing Studies has budgeted for $5000 to offset potential software purchases/licensing tools for research analysis (i.e., In Vivo and AI access), and additional knowledge mobilization processes that will be employed during Cycle 3 of the study.

2.7. Relevance to the partner organization and to Canada:

Describe (1) the main activity of the partner organization, (2) the partner's experience and proposed role in the project, (3) how the partner will benefit from this research, and (4) how Canada will benefit from this research.

The partner organizations, CCHL, CHLNet and Leads Global see that this project has three major values to the healthcare industry in Canada and, through its efforts, the broader health of the Canadian population. They are (1) a common vocabulary for describing leadership in health care; (2) stimulating inter-professional and inter-organizational leadership development efforts that reduce redundancies of effort and maximize financial efficiency; (3) describing a set of standards and expectations for the practice of leadership that inform accreditation processes, human resource practices (i.e., learning plans, performance accountability). Ultimately, all three values, as operationalized through the creation of a 'refreshed' LEADS framework, will lead to a higher quality of leadership practice, and that itself will ensure improved health services to the Canadian public.

In the first instance—i.e., common vocabulary across professions—we quote a common sense argument made in the context of developing the Health LEADS Australia framework: "[If]/when medical leaders are to lead the way forward in this century towards the transformation and improvement of healthcare across the globe then we must work between us towards a simple yet clear vocabulary that we can share with our clinical, management and technical colleagues at every meeting and every report" (Dickson & van Aerde, 2018, p. 183). This, indeed, has been the major success of the LEADS work to this point in its evolution. It has become rooted in almost 80% of healthcare organizations in Canada that use a framework for leadership and organizational development (CHLNet Steering Group, 2020). This enables doctors, nurses, and administrators to have a dialogue around leadership practice based on a set of expectations for leadership that they all agree upon. It empowers them to share perspectives on leadership practices as applied to common problems and to assist them in a better understanding of how they perceive those challenges. It is an antidote to indulging in separation and divisiveness and a method to seek common understanding.

In the second instance—a corollary of the common vocabulary argument--using a common framework such as LEADS enables organizations to design and deliver leadership programs that need not 'be separated' by profession or, indeed, in many instances, organizations. There is often great power in bringing people from different professions and organizations together who otherwise might not interact and look at similar problems together from a leadership practice perspective. It broadens their horizons and enables them to see issues from novel perspectives, often necessary for the acceptance of innovative solutions that challenge the status quo. Another advantage, of course, is financial; i.e., rather than having separate infrastructures and differential programs for leadership development for doctors, nurses, or administrators, they can be combined and, through the elimination of redundant costs, reduce the financial burden on the organization; while at the same time, making more resources available for expanding leadership development efforts to others who might not otherwise be able to benefit.

In the third instance, there are numerous examples across Canada where the LEADS framework has been integrated into the performance review process for leaders and managers, certification of aspiring leaders, the interviewing process for such individuals, and guiding the development of employee learning plans. Examples exist in Vancouver Coastal Health, the Saskatchewan Health Authority, and the Canadian Society of Physician Leaders, where they have developed a Canadian Certified Physician Executive credential for senior medical leaders.

Regarding services to the health system and the overall quality of health care for Canadians, it is common sense that the highest leadership quality is required. No one would invest in any enterprise that has poor leadership! Leadership has three essential functions. The first is integrating otherwise disconnected processes to ensure access to maximum quality personal health care. The second is to create safe, healthy workplaces. The third is to facilitate meaningful and sustainable health reform, where necessary. Effective change in all three requires exceptional leadership: from leaders in management, nursing leaders, physician leaders, and community leaders. In addition, the system must identify leaders at all levels—within each community, each hospital, and each health enterprise—who will work together to champion collaborative improvement in patient safety and quality.

In that context—today, in 2024—it is essential that for all the above reasons, to deal with the challenges facing healthcare leaders today and into the future, the LEADS framework be brought up to date with the best knowledge available. It is also imperative it be conducted in a manner so as to engage the users across the system in its redesign. Its original incarnation was prior to the COVID-19 pandemic and the rise of a multiplicity of serious social priorities, e.g., social justice, diversity and inclusion, and a health system that is struggling to be relevant to changing populations and challenges. This refresh is vital for us to have a health leadership cadre in Canada that knows what it takes to lead and how to do it most effectively.

2.8. Indigenous community involvement or impact (if applicable):

Fellowships that involve or impact Indigenous communities must comply with the Mitacs Indigenous Research Policy. Please provide information on i) Indigenous community support for the project, and their role in shaping its objectives & approach, ii) plans for Indigenous community access, use, and governance of resulting knowledge / data, and iii) the team's background in Indigenous research, including any planned training / mentorship the fellow will receive to address deficits in experience.

You may also submit 1-2 letter(s) of support from Indigenous Elders who are members of the partner community / communities and possess the authority to speak on community interests.

At the time of drafting this proposal, we understand that specific Indigenous communities will not be solicited during the course of this research project. However, during the three-Phase action research processes of community leader engagement, deliberate strategies to involve indigenous 'leader' representatives heritage, will be employed.

2.9. Relationship (if any) to past/other Mitacs projects:

Describe whether the current project is related AND provide specifics about the relationship (e.g., not related because it refers to a different research area OR if related, provide information about what has been achieved in past projects and how the current application complements other submissions).

LEADS Change has participated in one previous Mitacs project, which was just completed. It was titled Accelerating the Healthcare Leader's Career Pathways: Determining Pathways of Leadership and Developing and Testing a Mobile App Prototype. It is tangentially related for two reasons. First, some of the literature pertaining to the literature review may well be identified as also relevant to this project. Second, the LEADS in a Caring Environment capabilities framework was identified as an element for building the wireframe that resulted from the research.

2.10. References:

Please cite academic references listed in this proposal.

Berger, W. (2012). The secret phrase top innovators use. *Harvard Business Review*, *17*, 2012.

Cabrera D, Cabrera L. (2015). Systems Thinking Made Simple: New Hope for Solving Wicked Problems. Plectica Publishing.

CHLNet Steering Group, Grimes, K., Tholl, B., Adams, O., Bourgeault, I., Dickson, G., Follwell, E., Grimes, K., Heidemann, E., Lammi, B., Lawford, K., Mitchell, J., Norrie, O., Philippon, D., Sadi, P., Van Aerde, J., Villeneuve, M., & Geerts, J. (2020). *Benchmarking Health Leadership in Canada: 2020* (By CHLNet, LEADS Canada, & Cass Business School, City, University of London). https://chlnet.ca/wp-content/uploads/CHLNetBench2-1-3-25.pdf

Clark, A. W., & Trist, E. L. (1976). Action research and adaptive planning. *Experimenting with organizational life: The action research approach*, 223-236.

Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council of Canada, *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans*, 2018.

Coghlan, D. (2019). Doing action research in your own organization. SAGE Publications Ltd.

Coghlan, David and Teresa Brannick, Doing action research in your own organization, 4th ed., p. 8, London: Sage.

Cornish, F., Breton, N., Moreno-Tabarez, U., Delgado, J., Rua, M., de-Graft Aikins, A., & Hodgetts, D. (2023). Participatory action research. *Nature Reviews Methods Primers*, *3*(1), 34.

Dickson G, Van Aerde J. (2018) Enabling physicians to lead: Canada's LEADS framework. *Leadersh Health Serv (Bradf Engl) 31*(2):183–194.

Dickson, G. & Tholl, B. (2020) Bringing Leadership in Health to Life: LEADS in a Caring Environment (2nd edition). London: Springer.

Dickson, M. W., Castaño, N., Magomaeva, A., & Den Hartog, D. N. (2012). Conceptualizing leadership across cultures. *Journal of world business*, *47*(4), 483-492.

House, R., Hanges, P., Ruiz-Quintanilla, A., Dorfman, P., Javidan, M., Dickson, M., & Gupta, V. (2004). Cultural influences on leadership and organizations: The GLOBE study of 62 societies. Thousand Oaks: Sage.

Lepore, W., Hall, B. L., & Tandon, R. (2021). The Knowledge for Change Consortium: a decolonising approach to international collaboration in capacity-building in community-based participatory research. *Canadian Journal of Development Studies/Revue canadienne d'études du développement*, *42*(3), 347-370.

Oberschmidt, K., Grünloh, C., Nijboer, F., & van Velsen, L. (2022). Best practices and lessons learned for action research in eHealth design and implementation: literature review. *Journal of Medical Internet Research*, *24*(1), e31795.

Palinkas, L. A., Horwitz, S. M., Green, C. A., Wisdom, J. P., Duan, N., & Hoagwood, K. (2015). Purposeful sampling for qualitative data collection and analysis in mixed method implementation research. *Administration and policy in mental health and mental health services research*, *42*, 533-544.

Robinson, F., Piggot-Irvine, E., Youngs, H., & Cady, P. (2021). Struggling to achieve desired results from your AR projects?: Insights from the Evaluative Study of Action Research may help. In *The Evaluative Study of Action Research* (pp. 107-128). Routledge.

Sankaran, S., Tay, B. H., & Orr, M. (2009). Managing organizational change by using soft systems thinking in action research projects. *International Journal of Managing Projects in Business*, *2*(2), 179-197.

Sankaran, S., & Dick, B. (2024). Action Research and Project Management. In *Design Methods and Practices for Research of Project Management* (pp. 101-118). Routledge.

Tholl, B. (2014) Taking a Value Network from Concept to Reality: Canadian Health Leadership Network (A case study) Healthcare Management Forum pp117-121.

Wickson, F., Carew, A. L., & Russell, A. W. (2006). Transdisciplinary research: characteristics, quandaries and quality. *Futures*, *38*(9), 1046-1059.

3. Declarations

3.1	**Will the intern conduct any of the proposed research activities outside of the academic institution or partner premises?**	**No**
3.2	**Does the proposed research involve the following?**	
ai.	Human participants whose data, or responses to interventions, stimuli, or questions by the researcher, are relevant to answering the research question?	Yes
aii.	Secondary use of human data or health information (even if anonymized)?	No
bi.	Human biological materials, as well as human embryos, fetuses, fetal tissue, reproductive materials, and stem cells? This applies to materials derived from living and deceased individuals	No
bii.	Secondary use of biological materials (even if anonymized)?	No
3.3	**Will the proposed research require the use of laboratory animals, and/or potentially impact the well-being of wild/domesticated animals?**	**No**
3.4	**Will the proposed research require the interns to handle or be exposed to biohazards?**	**No**
	Biohazards (e.g., viruses, bacteria, fungi, parasites, toxins, prions, zoonotic pathogens, recombinant DNA, genetically modified organisms, viral vectors, synthetic organisms, cell lines/cultures)	No
	Radioactive materials	No
	Restricted substances (e.g., cannabis)	No
	Other:	No
3.5	**Will the proposed research involve access to facilities or infrastructure that house or transfers sensitive data (i.e., sensitive personal data or large amounts of data that could be sensitive in the aggregate)?**	**No**
3.6	**Will the proposed research involve critical minerals, critical infrastructure, or sensitive research areas as discussed in Annex A of the National Security Guidelines for Research Partnership?**	**No**
3.7	**Will the proposed research involve areas covered by the Export Control List, the Import Control List, the Area Control List , and/or goods/technology identified in the Controlled Goods List?**	**No**
3.8	**A partner organization located outside Canada?**	**No**
3.9	**A partner organization that is a Canadian subsidiary or branch office of an organization headquartered outside Canada?**	**No**
3.10	**A collaborator from an organization (academic, industrial, government, or non-profit) located outside Canada?**	**No**
3.11	**Have any academic supervisors declared a Conflict of Interest (COI)* as part of this application?**	**No**
3.12	**Have any interns declared a Conflict of Interest (COI)* as part of this application?**	**No**

4. Suggested Reviewers

Language of reviewers comments:	EN		
Name	**Email**	**Academic Institution**	**Department**
Dr. Stephanie Gilbert	Stephanie_Gilbert@cbu.ca	Cape Breton University	Shannon School of Business
Dr. John Lavis	Lavisj@mcmaster.ca	McMaster University	McMaster Health Forum
Dr. Kevin Kelloway	kevin.kelloway@smu.ca	St. Michaels University	Department of Psychology
Dr. Verna Yiu	provost@ualberta.ca	University of Alberta	Provost and VP Academic
Dr. Amber Fletcher	amber.fletcher@uregina.ca	University of Regina	Department of Sociology and Social Studies
Dr. Greg Marchildon	greg.marchildon@utornto.ca	University of Toronto	Institute of Health Policy, Management, and Evaluation

Reviewers not to be contacted by Mitacs due to potential conflict of interest:

5. Funds Allocation and Internship Details

(Sorted by Internship starting date)

Intern Name:	**Phil Cady**		
Start and end date:	2024-10-02 - 2026-10-01		
Internship Type:	Postdoctoral fellow		
Number of Months per Internship:	4	**# of consecutive internships:**	6
Total Duration (years):	2		
Lead Academic Supervisor:	Zoe MacLeod		
Academic Co-supervisors:			
Partner Organization Supervisors:	Brenda Lammi, Graham Dickson, Kelly Grimes		
Stipend/IU:	$18,333.33	**Research Expenses/IU:**	$1,666.67
Stipend Total:	*$110,000.00*	***Research Expenses Total:***	*$10,000.00*
Project expense details:	With respect to material and equipment needs, all expenses related to admin support, technology access, Working Group meeting costs, etc., are provided by the partner organizations as they have those resources in-house. Additional research support—i.e., to operationalize the Delphi component of the study--will also be provided as in-kind contributions from those organizations. The only additional needs are associated with the costs for travel, accommodation, and meals in support of whatever travel is required by the intern to attend partner meetings; and the partner organizations will cover those expenses (i.e., $35000).		
Partner Organization Contributions			
Partner Organization:	Canadian College of Health Leaders	**Funding Amount/IU:**	$0.00
		Funding Amount Total:	*$0.00*
Partner Organization:	Canadian Health Leadership Network	**Funding Amount/IU:**	$0.00
		Funding Amount Total:	*$0.00*
Partner Organization:	LEADS Change Consulting Ltd.	**Funding Amount/IU:**	$10,000.00
		Funding Amount Total:	*$60,000.00*
		Funding Total/IU:	**$20,000.00**
		Funding Grand Total:	***$120,000.00***

6. Application Participant Details

6.1 Interns

Note all related CVs and COIs will be found in section 6.4 and sorted by Intern's last name

Name:	**Phil Cady**		
Academic Institution:	Royal Roads University	**Department:**	Professional and Continuing Studies
Email:	Phil.Cady@RoyalRoads.ca	**Phone:**	250-882-2965
Degree program during internship:	Postdoctoral fellow	**Grad Date:**	2020-07-21
Internship Schedule			
Start and end date:	**2024-10-02 - 2026-10-01**	**Occurrence**	**Amount**
		1	$20,000.00
		2	$20,000.00
		3	$20,000.00
		4	$20,000.00
		5	$20,000.00
		6	$20,000.00

6.2 Academic Supervisors

Note all related CVs and COIs will be found in section 6.4 and sorted by last name

Name:	**Zoe MacLeod**		
Academic Insitution:	Royal Roads University	**Department:**	Professional and Continuing Studies
Email:	Zoe.MacLeod@RoyalRoads.ca	**Phone:**	250-391-2511

6.3 Partner Organization

(Sorted by last name)

Legal business name:	**LEADS Change Consulting**		
Operating name:	LEADS Change Consulting Ltd.		
Date of incorporation:	2010-07-21	**NAICS Code:**	611
Address:	3497 Maureen Terrace, Victoria, Canada, BC V9C 3P7		
Website:	https://new.leadsglobal.ca/		
Partner size:	1 - 49		4
Is your organization a parent company?	Yes		
Is your organization a subsidiary?	No		
Does the organization have an R&D department?	No	**Number of R&D staff:**	
Legal Status:	For Profit Canadian Private Corporation		
Funding Amount:	$60,000.00		
Contact Name:	Graham Dickson		
Email:	graham@leadsglobal.ca	**Phone:**	250-477-5970
Title/Position:	CEO	**Department:**	Graham Dickson
Have the funds committed by the Organizations identified in this application been leveraged against other federal or provincial programs?			No
Invoicing Contact from Partner Orgnization			
Name:	Susan Dickson		
Email:	sue53dickson@outlook.com	**Phone:**	250-477-5970
Address:	3497 Maureen Terrace, Victoria, BC V9C 3P7, Canada		
Payments should be:	Annually		
Net Invoice Term:	30 days		
Invoicing Requirements:			
Will Company/Organization transfer funds directly to MITACS?			Yes

Legal business name:	**Canadian Health Leadership Network**		
Operating name:	Canadian Health Leadership Network		
Date of incorporation:	2024-01-01	**NAICS Code:**	561
Address:	66 Forestview Crescent, Nepean, Canada, ON K2H 9P5		
Website:	chlnet.ca		
Partner size:	1 - 49		2
Is your organization a parent company?	Yes		
Is your organization a subsidiary?	No		

Does the organization have an R&D department?	No	**Number of R&D staff:**	
Legal Status:	Not for Profit Canadian Corporation	**If not-for-profit Canadian corporation:**	Health Organizations
Funding Amount:	$0.00		
Contact Name:	Kelly Grimes		
Email:	KGrimes@chlnet.ca	**Phone:**	613-612-5810
Title/Position:	Chief Executive Officer	**Department:**	Executive office
Have the funds committed by the Organizations identified in this application been leveraged against other federal or provincial programs?			Yes
	Program Name:		
	Partner Organization Contribution:		
Invoicing Contact from Partner Orgnization			
Name:	null null		
Email:		**Phone:**	
Address:	66 Forestview Crescent, Nepean, ON K2H 9P5, Canada		
Payments should be:	Every 4 months		
Net Invoice Term:	30 days		
Invoicing Requirements:			
Will Company/Organization transfer funds directly to MITACS?			Yes
Legal business name:	**Canadian College of Health Leaders**		
Operating name:	Canadian College of Health Leaders		
Date of incorporation:	2010-07-19	**NAICS Code:**	541
Address:	150, rue Isabella Street, Suite/bureau 1102,, Ottawa, Canada, ON K1S 1V7		
Website:	https://cchl-ccls.ca/		
Partner size:	1 - 49		25
Is your organization a parent company?	Yes		
Is your organization a subsidiary?	No		
Does the organization have an R&D department?	Yes	**Number of R&D staff:**	1
Legal Status:	Not for Profit Canadian Corporation	**If not-for-profit Canadian corporation:**	Health Organizations
Funding Amount:	$0.00		
Contact Name:	Brenda Lammi		
Email:	blammi@cchl-ccls.ca	**Phone:**	613-401-4456
Title/Position:	Brenda Lammi Senior Vice President	**Department:**	Professional & Leadership Development

Have the funds committed by the Organizations identified in this application been leveraged against other federal or provincial programs?			Yes
	Program Name:		
	Partner Organization Contribution:		

Invoicing Contact from Partner Orgnization			
Name:	null null		
Email:		**Phone:**	
Address:	150, rue Isabella Street, Suite/bureau 1102,, Ottawa, ON K1S 1V7, Canada		
Payments should be:	Every 4 months		
Net Invoice Term:	30 days		
Invoicing Requirements:			
Will Company/Organization transfer funds directly to MITACS?			Yes

6.4 CVs and COIs

See attachments on the following pages

April 4, 2022

To: *Mitacs Elevate Grant Application Appraisal Committee*

From: *Graham Dickson (PhD), Professor Emeritus, Royal Roads University and Principal, LEADS Change Consulting*

Re: *Letter of Reference for Intern Phil Cady, Post Doctoral Fellow, for Elevate LEADS Refresh grant*

Dear Mitacs Appraisal Committee Members:

My name is Graham Dickson, and I am CEO of LEADS Change Consulting and Professor Emeritus of Leadership Studies at Royal Roads University (RRU).

I am writing this letter in support of Phil Cady, DSocSci from Royal Roads University, who has agreed to work—as a Post Doctoral Fellow--with my organization (LEADS Change) and its other partners, the Canadian Health Leadership Network (CHLNet) and the Canadian College of Health Leaders (CCHL) on our proposed Elevate LEADS in a Caring Environment Refresh research project.

I attest to the fact that Dr. Cadymeets the following requirements. He:

- Is a Canadian citizen.
- Is an Adjunct Professor of Leadership based at Royal Roads University located in Victoria, BC Canada; and will be for the duration of the fellowship.
- Graduated from a Doctor of Social Sciences program in May, 2020; one year less than the five-year requirement to the proposed start date of the Mitacs Elevate project (proposed start date September 2024).
- Has fulfilled all DSocSci degree requirements (equivalent to a PhD, e.g., successful defence, final deposit, and sign-off of the dissertation),
- Meets the postdoctoral fellow eligibility criteria at Royal Roads University and will hold a postdoctoral fellow status for the entire duration of their Mitacs Elevate fellowship.
- Has committed to the Mitacs Elevate fellowship. We are applying for six internship units (two years) of Mitacs Elevate funding.

I have known Phil for almost thirty years. I first got to know him as a graduate student in the MA Leadership at RRU, where he was actually the first student to graduate from that program in 1997. Over the years, we have remained in touch and supported one another on leadership development programming, both as part of the RRU Leadership Studies department - and in other endeavours, such as workshops for the Canadian Society of Physician Leaders Annual Leadership Conference. Phil has collaborated on many initiatives aimed at growing the health leadership capacity in Canada. In that context, he has used the LEADS in a Caring Environment capabilities framework, endorsed and utilized in most health organizations across the country, to define and develop leadership practice,

which is the substance of the research 'refresh' project to ensure its relevance and ongoing face and construct validity for leaders in Canada's health system.

Phil has a strong qualitative and quantitative research background. He has worked across Canada in a multiplicity of organizations that use the LEADS framework for leadership development. His own knowledge of 'systems leadership,' a focus for his DSocSci dissertation, positions him exceptionally well for this project.

While a very knowledgeable researcher himself, he is also deeply grounded in knowledge mobilization work, which is fundamental to translating leadership research into leadership practice. This is indeed a major focal point of the LEADS Refresh project.

In particular, he possesses the following skill sets that I think eminently qualify him for this role.

1. **Prodigious energy.** Phil has 'energy to burn' in his multiplicity of roles as an adjunct faculty, teacher, and consultant to many different health organizations. He is a committed husband, leader, and teacher of leadership, and he has the passion to encompass the additional expectations of the Post Doctoral Fellowship. His work ethic is second to none.

2. **Credibility within senior leaders in the health sector.** Phil's many roles in the health sector and the way he conducted himself within those roles, has enabled him to build a strong, viable network with senior health leaders across Canada. He is seen as a knowledgeable, thoughtful, and dedicated leader—one who understands the demands and strategies to create change.

3. **Intelligence, knowledge and a passion for learning.** Phil has a razor-like intelligence that enables him to master complex concepts and ideas quickly. He is thoughtful and considerate in his approach but also persistent. He has a strong research background. His skill set includes an understanding of how healthcare works in Canada, the ability to engage sometimes crusty and difficult colleagues, and political acumen, all of which will be required in stewarding the Refresh project.

4. **Interpersonal/coaching skills.** Phil communicates exceptionally well. He articulates his thoughts clearly and effectively; but more important, he is a keen and sophisticated listener--a fundamentally important skill for the role of researcher. He asks perceptive questions and is willing to withhold judgment to encourage reflection and allow for sense-making.

5. **Teamwork skills.** Phil is a consummate team builder. He utilizes interpersonal skills and knowledge to set direction (with others) for his teams and initiate resolution approaches to address issues of negative conflict. He also has the ability to know his own limitations and strengths as a team member. He manages time well. Sets clear and feasible agendas for work and runs meetings exceptionally well.

6. **Applied research.** Phil is deeply ingrained in research methodologies such as action research, qualitative research, and quantitative research. He is deeply knowledgeable in the field of statistics but also fully understands the value of knowledge mobilization as a tool for change.

7. **Knowledge of both face-to-face and online learning**. Phil has a deep appreciation for the power of adult learning techniques and is knowledgeable about how to build them into both face-to-face learning environments and online learning environments.

Dr. Cady is a bright, articulate, and professional senior academic leader. His dedication, perseverance, and overall commitment to research will allow him to see the potential linkages between the 'users' of research and the 'developers' of it, which is vital to this project. I have no hesitation in endorsing him for the role of Post-Doctoral Fellow in this Mitacs Elevate grant proposal project.

Yours respectfully,

Graham Dickson
Professor Emeritus, Leadership Studies, Royal Roads University
CEO LEADS Change (LEADS Global)

PHIL CADY – ACADEMIC ACTIVITIES AND CONTRIBUTIONS as of July 2024

Phil Cady CD, BSW, MA(LT) DSocSci
6505 Torin Road
Brentwood Bay, BC
V8M2H5
(250) 882-2965
Phil.cady@royalroads.ca

Dear MITACS colleagues,

Thank you for receiving this application and my CV of activities completed during my course of study and PDF period. I believe the project ahead is an exciting one, and I hope that from how I have crafted the attached CV, my sample history of undertakings will provide a sense of my capacity for the LEADS Refresh MITACS proposal.

Thank you for your consideration, and I look forward to the possibilities ahead.

Sincerely,

Dr. Phil Cady CD, BSW, MA(LT) DSocSci
Adjunct Faculty and Post Doctoral Fellow | School of Leadership Studies
Faculty of Social and Applied Sciences| **Royal Roads University**
T 250.882.2965
2005 Sooke Road, Victoria, BC Canada V9B 5Y2 | royalroads.ca

Table of Contents

1. Academic Awards, Scholarships and Bursaries:

2021 Kelly Teaching Award for Outstanding Workshop Facilitation: Leading Complex Systems. Royal Roads University Professional and Continuing Studies.

2020 Royal Roads University Chancellor's Award for highest academic performance in the Doctor of Social Sciences program

2020 Royal Roads University Governor General Gold Medal Award Nominee

1997 Royal United Services Institute (RUSI) Convocation Scholarship

1996 Royal Canadian Legion Entrance Scholarship to Royal Roads University

1990 Canadian Armed Forces University Training Program for Non-Commissioned Members, full scholarship for Bachelor of Social Work at the University of Calgary

2. Professional and Academic Activities (Undertaken during DSocSci course of study and PDF period).

The various activities described below are undertakings arising, to a large degree, from my expertise in the area of systems leadership and decision-making developed during my course of study in the Doctor of Social Sciences program at Royal Roads University and the following post-doctoral period. The substance and process of studying for my Doctor of Social Science has increased my ability to help client organizations harvest the benefits of systemic leadership strategies, as highlighted in the examples below. ***Only some, but not all***, professional activities are illustrated below to demonstrate the diverse application and mobilization of knowledge acquired through praxis.

2024 Breakthrough Learning Custom Systems Simulation. At the invitation of the founder, I worked with the CEO and COO of Breakthrough Learning toward the consultation, design and testing of customized systems learning tools for high-consequence scenarios. Using the general structure as used in Friday Night at the ER (team systems thinking simulation), we designed two simulations: one for financial markets crisis and collapse and the other for mega project collaborations. This required a demonstrated capacity to develop a comprehensive and quick understanding of both industries (financial regulation and US Dept of Defense), the objectives of both simulations, the various metrics associated with each, and a strategy for gamification, testing and deployment.

2024 BC Provincial Government "Leading for Tomorrow" program design and delivery on Behalf of Royal Roads University. At the invitation of the Deputy Minister of the BC Public Service Agency, two colleagues and I were invited to work with an Indigenous staff member to design and deliver a two-day executive leadership retreat for all government Deputy Ministers and their Assistant Deputy Ministers and Executive Directors. The focus of the retreat was experiential learning related to transformational leadership and its relation to Indigenous Leadership and how such approaches to leadership can help the government reach its goals.

2024 Island Health Authority. At the invitation of the CEO and executive team, I was asked to work with the internal organizational development team to design and deliver a systems leadership session for 400+ attendees. Board members were also in attendance and enjoyed robust systems leadership conversations throughout the day. The Board Chair, in particular, offered very positive comments about the relevance of the leadership strategies and said that she felt they were "spot-on" in terms of addressing the goals and aims of the session.

2024 Canadian Conference on Physician Leadership Large-Group Facilitation. At the invitation of the Canadian Society of Physician Leaders, I first co-facilitated a pre-conference workshop and then led 260+ conference participants through a large-group open space forum and an interview matrix. The focus of these large

group sessions was to foster conversation and engagement on the subject of "things to pay attention to" in transforming the Canada Health Act. This was a participant-driven, highly engaging strategy designed to "pull" and not "push" content and learning. The result was a highly successful peer-to-peer day of highly relevant discussions and relationship-building among conferees.

2024 Concordia University Internal Staff Development. At the request of the internal leadership program Director, I was asked to facilitate a day of applied systems leadership learning with the Deans and Directors from across the University as it related to leadership issues in three strata: executive, managerial and production. Feedback was excellent, and they anticipate additional sessions in 2025. The session focused on identifying patterns in social system leadership, the "stand" they need to take as leaders, and the effective leadership strategies known to be associated with different patterns.

2023 CMA/PLI Faculty Lead to Support Hospital Merger Leadership Strategies. At the request of the Physician Leadership Institute, I was invited to serve as a faculty "integrator" to help connect program module content to emerging hospital realities and to ensure continuity across customized learning module facilitators and participants over time. This involved regular PLI meetings, faculty meetings, interactions, and consultations with the hospitals involved, as well as the development of a problem-based learning tool to help transfer knowledge into practice.

2023 Norquest Community College. At the invitation of the VP of Human Resources, I worked with 90 college leaders to address how to maintain the best of their current state as they implemented their strategic plan for the future. To achieve this, I facilitated a full day of applied polarity management, where the leadership team developed a single polarity map focused on the polarity of "continuity AND transformation." The map included "early warning signs" of over-focusing on one pole to the neglect of the other and what action steps could be taken to address them.

2023 Interior Health Authority Leadership Summit Facilitation. I was invited by the CEO and Organizational Development team to facilitate a day of applied learning with 223 leaders from across the health authority. This large-group session centred on the delivery of Friday Night at the ER (systems simulation), followed by a presentation and discussion of system leadership strategies, which were subsequently applied to real-time leadership projects and activities. This fun, lively session was also raised among other health authorities, leading to additional facilitation of similar designs in other regions in the province.

2023 Northern BC Health Authority Social Systems Workshop on Behalf of CMA/PLI. Facilitated a 20-member session for physician leaders and their administrative co-leads to apply social system strategies to address recovery and healing as a result of recent organizational turmoil that spilled into the public's eye.

Covering topics such as organic systems framework, systems patterns, and leverage points, participants were invited to bring "live" organizational work into the program, against which program content would be applied.

2023 First Nations Health Authority Cultural Safety and Humility Program Consultation and Development. Working with the FNHA Cultural Safety and Humility Team, I was invited to provide expert consultation input into what the health authority deemed to be a "world-class, systems-based experiential cultural safety and humility learning program" that operationalized their internal cultural safety and humility policy and directives. As a part of this initiative, I was honoured to have attended the Alaskan South Central Foundation Nuka Core Concepts training, which is regarded as the best of its kind in the cultural safety and humility space.

2022 Fort Worth, Texas Major Private Organization Leadership Academy. A Major manufacturer in the health technologies space invited me to engage 200+ global executives over two days to help increase their systems literacy and acumen, which would then be applied to their emerging global priorities in a post-pandemic world.

2022 Canadian Federal Trade Commissioner Services Global Consultation. For *six months*, I lead a team and process to design and deliver a multi-method, sequential priorities research project to consult locally engaged staff around the world, as well as core Canadian staff in an online format. Using "least common denominator" technologies, we led 3 x large-group, online open space forums, focus groups and variations of a World Café structure, deployed qualitative surveys, and then analyzed all data, engaged participants in the development of plans and activities to be proposed to the Federal Trade Commissioner and which would be implemented in the following six month period.

2021 Oil and Gas Centralization Consultation. Sixteen executives from a major Canadian oil and gas producer sought to consolidate its business unit staff development functions to obtain operational efficiencies. To achieve this, participants were oriented to the practice of "polarity management" to balance the tension between centralization and decentralization of the training functions using a polarity mapping strategy.

2021 Breakthrough Learning Friday Night at the ER Virtual Delivery Development. Two principals reached out to engage me in developing a virtual delivery modality for a healthcare systems thinking experiential learning activity named Friday Night at the Emergency Room (FNER). Prior to this point, the tool had been used only for in-person delivery, yet the global pandemic threatened this business model. My role was to serve as an expert panel member to help maintain the fidelity of the original simulation while converting it to a virtual delivery model.

2021 Government of Nova Scotia "Leading Complex Systems" leadership development in the context of a global pandemic. This was a two-week continuation of the same "Leading Complex Systems program for the Government of Nova Scotia, leading to a 2021 nomination and successful achievement of the Royal Roads University Kelly Outstanding Teaching Award for Workshop Facilitation.

2021 Canadian Medical Association, Physician Leadership Institute Needs Analysis. Acting as lead researcher, I worked with two hospitals to identify leadership and learning needs for the two medical staff of two hospitals that will merge in the next decade in a new hospital facility to house the previously separate venues. Some 600 medical staff were engaged through interviews, surveys, and focus groups to identify the leadership competencies necessary to merge the two facilities successfully. This project took six months to complete.

2021 City of Cochrane, Alberta Systems Optimization All-Staff Session. Working with the Chief Administration Officer and 54 staff to facilitate an experiential systems leadership activity, and then helped staff apply learning to real-time issues concerning the municipality.

2021 Dallas, Texas – Merger of Two Major US Pharmaceutical Companies. At the annual leadership academy, I worked with 220 staff to conduct cultural due diligence through shared learning and application of system leadership strategies through large-group facilitation. This series of discussions and applied learning focuses on dominance and "otherness" when two organizational cultures meet over common work. The group developed and set in motion strategies for innovation, collaboration and data-driven decision-making,

2020 Government of Nova Scotia "Leading Complex Systems" leadership development in the context of a global pandemic. Thirty-two Government of Nova Scotia "high potential" leaders brought large complex projects to a Royal Roads University Executive Development learning program designed to illuminate leadership strategies relevant in the context of COVID-19. As the province sought to balance the polarity of health AND economy provincially, the public service began to experience new demands and constraints requiring a shift in conceptualization and strategy when making decisions in complex settings.

2020 – Municipal and Provincial government consultations on COVID19 pandemic strategies. During the months of March and April of 2020, I was contacted by senior municipal and provincial leaders to discuss the application of systems leadership strategies in the context of a pandemic response. The common denominator across all consultations was whether or not to proactively consider a "stay at home order" or wait to let the pandemic situation emerge. The consultation was largely based on the Cynefin Framework for sense-making (see certification later in this document). Leaders requested conversation and strategizing on the nature of causality in this emerging complex public health crisis.

2020 Royal Roads University Redesign, Conversion and Deployment of the Master of Arts in Leadership Second Term. The MA in Leadership second residence was live, online (asynchronous) in the pre-residence lead-up when BC's Provincial Health Officer issued a mandatory "stay at home order" for an indeterminate amount of time. Using the principles of applied systems thinking and complexity leadership strategies (disintermediation, transparency, rapid iteration and experimentation), I took the lead in migrating the University's flagship program to synchronous online delivery under extreme time and resource pressure and constraints. Over the subsequent two iterations, the 300-hour term and 150-hour residencies flourished, with the Spring residence receiving a 95.7% satisfaction rate with the learning experience in a synchronous online environment.

2020 – Vancouver Coastal Health Decision Support Division Systems Alignment Learning Day. The entire 90+ person Decision Support Services convened to explore and implement applied systems optimization strategies in the service of the Health Authority's role.

2020 – University of British Columbia Facilities Management. In one of the largest University settings in North America, approximately 100 facility staff came together on two separate days with a view to exploring the social system conditions that were emerging as the COVID-19 pandemic unfolded. This session was specifically centred on the role of turbulence and context when leading and working in turbulent, unpredictable settings.

2020 – Private, for-profit Rural Utilities Service Provider. At several points during the COVID-19 pandemic response, this rural utility provider sought strategic alignment with its board and executive in order to both confront the present and strategize on how to position itself in the future through applied complex systems thinking strategies (moving from a tactical organization to a strategic one). This series of engagements required that I lead both the facilitation of the strategic planning engagement process and learning days for both the Board and Executive in order to develop a common vocabulary and frame of reference for dealing with uncertainty, competition and a changing provincial landscape.

2020 – Power+Systems Trainer Network – Worked with master trainers in Barry Oshry's organic systems theory to establish global standards for training and certifying new trainers in a social systems methodology.

2020 – Parks Canada Systems Learning Conference. I was invited to facilitate a full day of learning and analysis with Federal land negotiators working both regionally and nationally in the stewardship of national resources. Participants participated in a large-group simulation at their headquarters, followed by an applied force-field analysis of driving and restraining factors related to ssocial system optimization strategies.

2020 – Large Canadian private financial institution – applied systems thinking application and training. Worked with 30 senior leaders from across this regionally-based finance-sector institution to explore and deepen understanding of systems leadership strategies. The session was based on the use of a foundational component of my DSocSci portfolio to illustrate system optimization strategies across the total geographical footprint of the institution. Using the *"Friday Night at the ER"* simulation, participants were oriented to systems thinking strategies and how to help others learn to improve unit performance through collaboration, innovation and data-driven decision-making.

2020 – Guelph Hospital – Partnership in Social Systems. I was invited to facilitate a full-day applied "partnership in social systems workshop based on the work of Barry Oshry, one of the three core components of my DSocSci portfolio. Thirty-two members of the executive leadership team were in attendance and applied core system strategies to live workplace projects in the context of an emerging pandemic crisis.

2019 – General Electric Global Healthcare Division Strategy Development Facilitation. I was invited to facilitate a large group method for engaging European account executives in learning the value of social system optimization (vice sub-optimization) strategies. The session involved 60 participants from 16 countries speaking 13 languages. Baseline measurements and improvement strategies from the systems simulation "Friday Night at the ER" were measured in the domains of system financial performance and system quality outputs and then tested to observe the effect of specific strategies on system performance.

2019 – Ontario Medical Association Leading Social Systems in Healthcare – During this activity I led system complexity, system optimization, and social systems learning modules for 36 executives of the Ontario Medical Association. The session spanned two full days of application of learning to workplace projects in real time. This was a refined and tailored version of the Physician Leadership Institute program I co-developed with the president of the Canadian Association of Physician Leaders, which was subsequently approved by both of Canada's medical colleges for Continuing Professional Education (Section One) credits for physicians – no small feat.

2019 – Saskatchewan Medical Association Leading Social Systems in Healthcare. Worked with 40 physician leaders in this session, using the same program design as the session for the Ontario Medical Association identified above.

2019 (2017-Ongoing)– Design, Develop and Co-Deliver a "Leading Complex Systems" Five-Day Executive Retreat on Behalf of Royal Roads University. Delivered twice annually, once in Victoria and once in Halifax, this program involves 20-24 participants who seek to apply complexity leadership-related program content to real-life work projects they bring into the learning environment. The program involves a general orientation to systems thinking and complexity thinking,

applied decision-making based on the Cynefin Framework, design thinking, Organic Systems Framework, system optimization and Indigenous ways of experiencing and addressing complexity. Participants prepare a poster-board presentation, which is required to illustrate the application of core concepts to their real-world projects. To date, this program and content have been applied to over 100 projects with program evaluation ratings generally 4.5/5 or higher in terms of relevance and satisfaction.

2019 –Advancing Healthcare Leadership Executive Retreat, Residence-Based Program Design Lead for Royal Roads University. I serve as program design leader and lead facilitator for this program, which resides in the Professional and Continuing Studies portfolio at Royal Roads and brings together guest faculty and healthcare CEOs from across Canada. The program recently received accreditation from the Canadian College of Health Leaders (for 16.5 CPE credits) since it directly complements the LEADS in a Caring Environment framework and specifically addresses the LEADS domain of "Systems Transformation," Participants receive a pre-program call from faculty at which point they are coached through the selection of complex work projects were content can be directly applied in an area of importance to the participants. The program is targeted at healthcare professionals at the director level and above.

2019 – Saint Joseph's Healthcare London Senior Leadership Retreat. I co-lead the design, development and delivery of a highly customized "Leading Systems" two-day program for the CEO and 140 leaders of the St Joseph's Healthcare organization. The program included Barry Oshry's Organization Workshop in a large-scale format and facilitation of large-group methods for the development and implementation of system optimization strategies.

2019 – Canada School of Public Service Digital Transformation Workshop for National Project Leads. Worked with the Canada School of Public Service (CSPS) program team lead and a Design Thinking expert to explore system optimization strategies through the use of the "Friday Night at the ER" systems thinking simulation with 24 Federal Ex-Level participants. In this session, system strategy polarities were augmented by a focus on the Canadian Government's Principles of Digital Transformation. After the simulation, participants were provided with a design thinking iteration challenge to improve system decision-making and performance metrics through the possibilities of digital services.

2019 – Amazon Alignment of Organizational Culture and Enterprise Strategic Objectives. Worked with the Amazon AbeBooks Division CEO and Executives to assess the alignment of current cultural factors with Amazon's organizational "levers" with the goal of achieving a substantial increase in profitability. The ideal culture was defined by participants, after which a forcefield analysis was conducted and then decisions were made to close the gap between current and ideal cultures. Each participant was afforded an opportunity to provide input into strategy map development based on system optimization principles and strategies.

2019 (2013-2019 Inclusive and ongoing) – Government of Nova Scotia Public Service Leadership Development. During this period, I lead a project with the Public Service Commissioner and the Deputy Minister to the Premier of Nova Scotia to design, develop and deliver multi-level social systems leadership programming and services to increase the province's leadership capacity for all public service employees: from new hires, through to and including sessions involving all Deputy Ministers. To date, over 1000 participants have been in the classroom with me to explore systems thinking fundamentals, social systems leadership strategies and complexity leadership strategies for large divisional projects.

2019 – Government of Nova Scotia Department of Justice System Alignment. Led the development and deployment of an enterprise-wide assessment of the operational culture of the Central Nova Scotia Correctional Services Facility (prison system), which was followed by several days of learning and application for the entire staff. The learning was centred on learning and implementing social system leadership strategies necessary at all levels in order to create a self-defined culture for operational excellence in correctional services.

2019 – Vancouver Coastal Health Informatics Division Decision Support Development. Worked with all 90 staff from the division in a one-day session designed to help learn social systems patterns and strategies through Oshry's (2019) Organization Workshop Exercise and the application of system optimization to the departmental strategic direction. Each staff person had the opportunity to contribute to strategy development and the necessary changes in structure and behaviour required to sustain growth in demand for their decision-support function.

2019 – Oregon Health Sciences University and "Breakthrough Learning" System Dynamics Strategic Planning Product Development Consultation. As a member of the Breakthrough Learning (Friday Night at the ER IP owners and developers) Expert Panel, I participated in design discussions and pilot-tested the use of a new tool based on systems thinking principles for strategic planning. The tool, to be known as ASK MATT in the marketplace (ASK MATT = Assessing Strategic Knowledge Meta-Analysis Think Tank), is in the development iteration phase prior to the acquisition, and substantial critical feedback was sought from Expert Panel members during this one-day meeting.

2019 – Domain 7 System-Focused Strategic Planning. Facilitated a full-day session of two modules, AM and PM, aimed at a) facilitation of an all-staff session focused on system patterns in a virtually distributed adaptive organization where technology is not a neutral factor and b) orient 20 new staff to the system optimization factors driving this high tech firm's growth. This was the second engagement with this firm since, due to rapid growth and service demand, there was a need to align new staff with the language, system strategies and decision practices the organization had embedded in the first session in 2017.

2018 – FIFA World Cup Qatar Supreme Committee for Delivery and Legacy Facilitation and Consultation. Working with the Host Country Team, I was asked to work with the Health, Safety, Security and Environment team to engage all major competition and non-competition venue project leads along with FIFA tournament staff to enhance national resilience in support of the World Cup. Reporting to the Secretary General, I facilitated two weeks' worth of large-scale events and learning activities for senior officials across projects to help create an integrated approach to system optimization by applying core system leadership strategies.

2018 – Design, Develop and Deliver the Leading Complex Systems in Healthcare Program for the Canadian Medical Association Physician Leadership Institute. Working with the President of the Canadian Association of Physician Leaders, I was invited to develop a program that would help Canadian physicians learn the nuances of leading in complex social systems such as the Canadian healthcare system. The program covers two days and includes topics such as frameworks for understanding complexity, decision-making, social systems leadership, social patterns, archetypes, and more. The program was piloted at the Canadian Society for Physician Leaders Annual National Conference, where it received a standing ovation from Canada's physician leaders, which was the first for the Canadian Society.

2018 – Alberta Health Services CEO and Senior Leadership Team "Front Line Leadership" Session and Large-Group Facilitation. At the invitation of the CEO of Alberta Health Services, I was asked to convene a large group session for 230 senior staff from the organization to learn about social systems and the relevance to front-line leader engagement with a view to harnessing what Barry Oshry referred to as "Total System Power." This involved the facilitation of a modified version of the "Organization Workshop" grounded in the Organic Systems Framework, followed by the facilitation of a modified Open Space Forum designed to explore how to enable system-wide "Middle Integration."

2018 – Alberta Health Services Community and Rural Mental Health (CRMH) All-Staff Session. At the request of the Zone Executive Lead, I was asked to convene a similar session as the CEO session mentioned above but to differ it slightly to be more applied and relevant to the Regional needs of this portfolio. Specifically, following a modified Organization Workshop in the morning, I was asked to facilitate the exploration of a series of conversations related to system optimization in the service of the strategic plan of the Zone. 212 Staff were involved in this session.

2018 – Alberta Health Services North Zone All-Staff Session. This was the first occasion in more than a decade where all 200 staff from the North Zone could come together and develop shared learning and language as the CEO and CRMH sessions with a view to developing a core common strategy. The format was similar to the previous Alberta health Services Sessions yet questions and content were specifically applied to the Zone's needs and realities. Participants experienced this session as lively, fun, and relevant.

2018 – British Columbia Assessment Authority Mainland Vancouver and Fraser Valley All-Staff Session. This session involved 140 Provincial Assessors coming together at the invitation of the Executive Director to explore system empowerment and development strategies. Similar to other sessions, this engagement was centred upon Oshry's Organization Workshop Exercises, followed by a large-group Interview Matrix session designed around four key systemic questions related to the strategic system objectives of the region.

2018 – Relay Resources, Oregon, System Optimization and Train the Trainer Facilitation. This two-day event first involved 60 senior leaders and managerial staff from a social-mission-driven organization serving populations facing barriers to employment for a variety of means. Staff wanted to learn the principles of system optimization and then conduct a force-field analysis of driving and restraining forces related to the implementation of strategies for system optimization. The second day involved intensive coaching with ten internal trainers on how to help their respective divisions operationalize the system optimization strategies unique to this organization.

2018 – The Boston Consulting Group Global HR Conference Learning Day Facilitation. HR leads from across one of the world's most respected consulting firms gathered in Scottsdale, Arizona, where I was invited to serve as a day-long "keynote facilitator" of system optimization learning and application. The session involved 36 HR Leads from across the world gathered together to explore their value proposition in the organization and how to stay focused on their systemic function and raison d'etre. This was a particularly rewarding session that I was honoured to facilitate since I have read and frequently teach from one of the firm's core publications: "Clausewitz on Strategy."

2018 – Facilitator for the Canadian Tire National Leadership Forum. The need for this session, involving 180 national senior leaders, was a direct result of a shift in Canadian policy in many provinces as it relates to a change in the minimum working wage. The context for Canadian Tire's operation is such that wage shifts put increased pressure on margin and legal operating constraints. The AM session focused on social system strategies for staying focused amid turbulent times where falling out of partnership is a very real possibility. In the PM, I used a modified open space forum to address a proprietary strategy and the role of systemic leadership in making it happen.

2018 – Carea Community Health Services, Ontario. Serving as a volunteer, I facilitated a clinical lead, full-day, all-staff session focused on system optimization strategies in the service of the organization's role in the national opioid response strategy. The session involved the CEO and all senior staff and 30 senior leaders.

2018 – Gray Bruce Health Services Medical Lead Learning Day. I led the design and facilitation of an innovative workshop that had never been attempted before by

systems trainers. I created a workshop design for the host organization where I ran two organizations side by side in a simulation, explored patterns and strategies in their leadership and then announced a merger. As the organizations came together, we explored system processes and possibilities for creating a robust organizational culture. The session involved 40 clinical department heads and the CEO's executive coming together in a day of shared learning.

2018 – City of Grand Prairie Newly Elected City Council Week-Long Strategic Planning Session. I was contacted by the Mayor of the City of Grand Prairie to observe, support and facilitate the off-site strategic planning and onboarding of 14 newly elected members, the CAO, senior department Directors and the Mayor himself. Due to the many conflicting and competing interests of the council, the Mayor asked if I would help the council first learn the foundations of Polarity Management and how to use the Cynefin Framework for sense-making as related to the work of the council. After facilitating workshops on these constructs, I was asked to observe the council in process and comment, question, and intervene as necessary, with a view to helping participants apply decision criteria to live, contentious council issues.

2018 – Design, Develop and Pilot The Physician Leadership Institute "Leading Social Systems in Healthcare" at the Canadian Society of Physician Leaders Annual Conference. I co-designed and co-led this inaugural program (myself and the editor of the Canadian Journal of Physician Leaders). The program content focused on the complex landscape of healthcare, the relationship between technical and professional knowledge, hospital optimization system strategies, social system strategies and archetypal patterns. The program itself was approved by the Canadian Medical Association colleges for continuing professional education credits. The 24 national healthcare leaders present in the room thanked us by way of a standing ovation – a first-ever for a pilot program with this critical thinking group! A second iteration of this program was delivered in Montreal in September of 2018 with 16 emergency room physicians.

2018 – Facilitate an Off-Site, All-Staff Retreat for Versett, a Fast-Paced, Rapidly Growing Digital Services Firm. This young and energetic private sector firm of 55 staff with offices across Canada and the United States was seeking leadership and system development learning and support as it positioned itself for rapid growth. The organization leaders knew the context for their services was rapidly changing, which presented challenges to vertical growth and integration. The AM portion of the retreat focused on social system patterns and decision context, followed by the application of content to four strategic issues in the afternoon. All staff were enthusiastic and optimistic about the possibilities that had emerged through the application of content on issues of real importance to the viability of the enterprise.

2018 – YMCA Hamilton – Niagara Merger. The CEOs of both organizations had asked if I could design and facilitate a day of learning and application of social system optimization strategies relevant to the merger of two organizations in the

context of a long-standing history of local relationship development and program successes as they came together as one, larger, geographically dispersed entity under one CEO. The session involved 150 senior leadership team members from both organizations. The end result was agreement and group input into the development of strategic priorities and points of leverage to be considered within the upcoming six months of strategy execution.

2017 – Multiple System Leadership and System Strategy Sessions for Alberta Health Services South Zone, Central Zone and PLP (People, Legal and Privacy) Department Staff. This series of full-day, all-staff sessions was requested by the Executive Director of Organizational Effectiveness and involved more than 450 participants over four days. Each session was similar in design and content as the client requested. The aim was to use Oshry's Organic System Framework strategies to help stay focused during turbulent times in their sector mosaic. Each session also involved large group facilitation techniques with content centred on all-staff engagement, increasing systems literacy, and leadership in complex settings.

2017 – Engineers Without Borders (EWB) All-Staff Organizational Repositioning and Leadership Strategy Session. In the context of the ever-growing demand for support in the domain of sustainable engineering services in developing countries, EWB was seeking to make strategic decisions to reduce the services they provided while augmenting other core services through the redeployment of resources. This three-day session involved 40 leaders from around the globe, coming together to learn the system demands they may encounter and to come to a consensus on which areas to let go of and which areas to retain. The session involved applied, experiential learning (Organization Workshop Exercise followed by application to real projects and initiatives under way), organization optimization (the heart of their need), and then to explore strategies and priorities for implementation.

2017 – First West Credit Union Post-Merger Decision Support. This session involved 40 back-office decision support staff seeking learning and guidance on addressing turbulence in system decisions (I.e. which operating and database systems to keep, why, by whom and how), and how the social system structure would respond to increased tension throughout the organization as a result of a merger between four separate credit unions. In this session, participants learned of patterns of relationships among groups and how (they) might apply as they navigated nascent turf wars and over-differentiation among organizational functions.

2017 – M'akola Housing Society Strategic Decision Making. At the request of the Chief Operating Office and the CEO, I was asked to facilitate a strategic decision making session with the Senior Executive Team of 13 people. This First Nations construction and housing development enterprise seeks to remain competitive in a political charged environment with many unknowns related to staff uptake, empowerment, project leadership, regional initiative and responsibility and more. The day started off with learning related to fundamental concepts in complex

systems thinking, establishing a shared language, and then exploring optimization strategies and how they related to the direction of the organization in a very competitive landscape.

2017 – The British Columbia Public Service Agency Client Service Director Alignment. At the request of the Deputy Minister, I was asked to convene all of the BC Government's Client Service Directors specifically to help stay focused on partnership through the lens of the Organic System Framework organization Workshop, and then to help them explore the context of their decision making on client portfolios while under increasing Departmental pressure related to shared services advisory services. This session involved 36 Directors and Assistant Deputy Ministers seeking to increase their collaborative capacity in "complex system delivery streams."

2017 – Saint Joseph's Care Group. Thunder Bay, all-Staff Multi-Site Retreat. At the request of the Director of Communications, I was asked to provide a learning session for 76 staff in the area of system optimization and social systems leadership through a variety of experiential learning activities.

2017 – BC Teaching and Learning at Home Society. This agency serves and provides academic oversight for parents who homeschool their children. The organization is virtual in nature and seldom has an opportunity to come together for shared learning. The CEO had felt the agency was losing sight of how decisions were made, the relevance of decision criteria and changing decision context post-election. 90 staff came together for two-days of learning and facilitated conversation on a variety of practical topics informed by applied experiential learning in the area of complex systems thinking.

2017 (and 2016) – University of Regina Executive Leadership Development. I was asked to work with multiple program leads to design and deliver a series of "systems leadership" sessions for both academic and administrative staff. All content was applied to projects from across the University. Each program involved 24 participants who were asked to bring "complex projects" they were working on back at work into the program sessions so that they could learn with and from one another in the application of systems leadership strategies to issues they determined to be important.

2017 – WestJet True North Strategy Sessions. In a climate of increasing acrimony and threats of unionization by airline pilots and flight crew as shareholders, I was asked to convene a setting where 55 participants could discuss how to maintain a positive organizational climate while experiencing challenges to their strategic direction: globalization and increasing air fleet capacity. The important factor for this client group was the role of context and pressure on decision-making processes.

2017 – YMCA Hamilton-Burlington Employee Engagement Strategy Development. At the request of a regional senior manager, I was asked to facilitate a

setting exploring the unique pressures facing middle managers and then to develop a strategy for enterprise-wide engagement. This organization was not in a situation of decline and was very positively oriented and enthusiastic. The CEO was fully engaged in the session, particularly in afternoon discussions as his 90 senior leaders explored strategic directions and branding in the context of a pending increase in minimum wage in the province, which would place extreme financial pressures on the organization operations, and consequently, on the community of members and users.

2016 - Alberta Health Services South Zone. Amid a public crisis in an extended care facility, AHS sought to stay focused on its reorganization while the Zone Executive Lead was in transition. AHS invited me to facilitate a large-group session for 150 people wherein they could both learn about social system patterns and also have all staff provide input into core decisions facing the Zone. The Morning workshop centered on Organic Systems Framework followed by a large group method related to staying focused on partnership in organization life.

2016 – ATCO Engineering – Working with all staff across central and regional headquarters, I was asked to create a setting and facilitate two days of applied learning for 90 staff related to social complexity, decision making and organizational culture as the organization was preparing to be acquired and re-branded by a US-based parent company with an international footprint. The organization had major decisions to make regarding a portfolio of services and executive leadership and came together to explore central elements in a near-term strategic plan.

2016 – Canadian Forces Base Esquimalt Logistics. Sixty (60) staff were requested to provide input into how to address increasing context pressures (competitors) in the face of declining capacity to meet operational readiness requirements. In the face of increasing union pressure, senior leaders sought system-wide input into strategies for staying focused on immediate operational requirements. This one-day session engaged all managing staff in developing a strategy for enterprise alignment.

2016 – Veteran's Affairs and the Canadian Armed Forces Military Family Resource Centre Engagement. From the period of 2012 through until 2018 I sat as a volunteer board member of the local Military Family Resource Centre. During this period, the Minister of Veteran's Affairs announced a 59 million dollar expenditure to increase service delivery to Veterans in Canada beyond retirement. I served as a facilitator of several meetings and large-group sessions between two federal departments to explore metrics associated with system-wide decision-making and the effectiveness of the departmental strategy.

2016 – Capacity Canada. Served as a volunteer for this nationally-focused non-profit organization whose mandate is to provide quality development and support services to non-profit organizations across the country. I facilitated a half day of

learning related to social systems which was then directly applied to projects each Executive Director brought forward from program pre-work.

2016 – Canadian College of Health Leaders. I facilitated multiple volunteer sessions in support of the Power+Systems "Worldwide Week of Partnership." The session was focused on how the Organic Systems Framework and the Organization Workshop were highly relevant and applicable to healthcare in Canada on both a provincial and national level.

2016 - Domain 7 Strategic Planning All-Staff Retreat. I facilitated two days of strategic thinking constructs and relate to sector-specific decision making, which was subsequently applied to the planning process for this young, vibrant high tech organization.

2016 – Envision Financial Leadership Summit. Four CEOs asked if I would facilitate an off-site summit and learning opportunity intended to present and address key concepts relevant to a real-time merger of four financial institutions. Staff were said to be struggling with legacy systems, loss of identity, organizational culture clashes, decision support processes and other factors that could potentially derail the pending merger. 200 participants attended several experiential sessions with a view to discovering commonality and productive possibilities in their new relationships. Centred on the social systems work of Barry Oshry's "When Cultures Meet" combined with industry-standard diagnostics, this session was illuminating and profound for many and a success for all.

2016 – Government of Nova Scotia Executive Council Office and Communications Nova Scotia All-Staff Sessions. At the personal request of the Public Service Commissioner, I facilitated two separate all-staff sessions (180 people total) for each department. In each session I facilitated social systems learning through the Organization Workshop exercise in the morning, followed by robust large-group methods in the afternoon to explore application of the concept of "middle integration" and what the concept would mean in practical terms for each group.

2016 – Military Family Resource Centre Strategic Planning Retreats. In the capacity of volunteer, through an array of means and activities, I facilitated all-staff input into strategic plans leading up to Board AGM sessions for Petawawa, Halifax and Esquimalt centres. Approximately 180 staff, Board members, families and volunteers were involved in these sessions.

2016 – Pacific Opera Victoria Board Strategic Planning Retreat and Facilitation. At the request of the Executive Director of Pacific Opera Victoria, I facilitated a day-long strategic planning process of engagement involving approximately 20 Board and staff members. Directly relevant to this session, I was asked to explain the socially constructed nature of the planning process that underpinned my methodology, which lead to a healthy and enlightening conversation by all.

2016 – Stocksy United Co-Op Platform Retreat. It was a privilege to facilitate a multi-day all-staff planning retreat for this young, vibrant, market leading digital services firm of 90 people. The unique proposition of Stocksy is that they lead the development of the co-op platform business model which incorporates a high degree of artist ownership of product in the digital space. This changes the social system dynamic patterns requiring adaptive facilitation techniques.

2014 – 2016 – Decision Making in the Canadian Oil and Gas Industry. During this period, both oil and natural gas prices were in an extreme state of turbulence due to global market conditions. I was engaged by Encana Corporation and Enbridge Corporation separately to assist in developing their capacity to understand leadership and decision making in complex environments. Both engagements were national in scope and involved front line engineers and executives alike to learn the context factors and heuristics associated with decision making in environments of increasing complexity and competition.

3. Conference Presentations and Conference Facilitation

Insights that I have developed through my course of studies in the Doctor of Social Sciences have proven to be valuable to organizations across sectors and industries. With increased exposure to systemic leadership strategies, and an ever-increasing awareness of interdependence in social systems, I have been fortunate to bring my insights and facilitation capacity to a wide variety of audiences as illustrated below.

2024 Canadian Conference on Physician Leadership Large-Group Facilitation. At the invitation of the Canadian Society of Physician Leaders, I first co-facilitated a pre-conference workshop and then led 260+ conference participants through a large-group open space forum and an interview matrix. The focus of these large group sessions was to foster conversation and engagement on the subject of "things to pay attention to" in transforming the Canada Health Act. This was a participant-driven, highly engaging strategy designed to "pull" and not "push" content and learning. The result was a highly successful peer-to-peer day of highly relevant discussions and relationship-building among conferees.

2019 – The Doctors of British Columbia Specialist Services Agreement. Facilitated system-wide conference conversation on systemic strategies for consideration in the re-development of the Provincial Specialist Services Agreement. The session included 200+ participants from all areas of specialty from across the province. The session was the first of its kind for medical specialists and extremely well received by this highly educated population.

2019 – YMCA National CEO Engagement Summit. Served as sole facilitator for a sold-out plenary session with 211 YMCA CEOs and executive team members and a sold out seminar (65 CEOs). The subject of the plenary was a workshop based on Oshry's (2018) Organic Systems Framework modified to include my dissertation focus on the context for organizational decision making and the similarities/differences between reflex and intentional responses to system demands based on awareness of context causality.

2018 – International Systemic Leadership Summit. At the request of renowned systems leadership author, Barry Oshry, I presented a 1.5 hour video interview on the subject of Organic Systems Theory and Framework to over 1400 conferees from around the globe in a virtually distributed conference followed by a two-day Q&A and dialogue exchange. I was honored to contribute and to be among some of the best, most respected academics and practitioners in my field of study.

2018 – Canadian Society of Physician Leaders Annual Conference: Design, Develop and Pilot The Physician Leadership Institute "Leading Social Systems in Healthcare" Program. Co-designed and co-lead (myself and the Editor of the Canadian Journal of Physician Leaders) this inaugural conference program. The conference program content focused on the complex landscape of healthcare, the

relationship between technical and professional knowledge, hospital optimization system strategies, social system strategies and archetypal patterns. The program itself was approved by the Canadian Medical Association colleges for continuing professional education credits. The 24 national healthcare leaders present in the room thanked us by way of a standing ovation – a first ever for a pilot program with this critical thinking group! A second iteration of this program was delivered in Montreal during September of 2018 with 16 emergency room physicians.

2017 – National Leadership Circle Conference, The Vanier Institute for the Family. On behalf of Veterans Affairs Canada and the Department of National Defence Military Family Support System, and as a volunteer member of the local Board of Directors, I was asked to contribute to this national body conference by representing the research interests of local service delivery centres. In particular, the system had historically emphasized program outputs rather than program outcomes which some members found challenging, confusing and to a degree, threatened by. My role was to present and discuss the importance of action research in helping create change within this system. While not specifically related to my content knowledge, the session did leverage my capacity as a system researcher.

2016 Veterans Affairs and DND Conference. Facilitated this important conference of Regional (Pacific) community members, service providers and military members seeking to provide input into a national strategy to support veterans post-release from the Canadian Armed Forces. Input gathered from this conference fed directly into the national steering committee strategic planning and needs analysis as a result of the VAC Minister's announcement to provide $89 million dollars in forecasted funding for "cradle to grave" service support.

2016 BC Centre for Non-Profit Housing Annual Conference. Facilitated a conference break-out session related to social system strategies for non-profit leaders. The conference keynote for this session was David Stroh, renowned author and unabashed fan of social systems work, who also publicly urged attendance at my session due to its relevance and value to leaders in this sector. 38 participants attended the session which received excellent reviews by all participants.

2015 – Sino-Canadian Conference for Leadership and Regional Economic Development. The Royal Roads University Vice President of Global Advancement asked me to design, develop and facilitate an international conference to include the Mayor of Shanghai and the Mayor of Victoria and their top 100 private and public business and economic specialists from each country. The conference, centred on the context of Canada-China relationships was highly successful, leading to many multi-million dollar business partnerships, purchases and arrangements as well as resulting exchanges and ongoing meetings. Subsequent to the conference I lead the development of a post-MBA, private Sino-Canadian leadership development partnership program.

2015 – Accelerating Alberta Primary Care Network Conference – Facilitated a group dialogue and exploration of Organic Systems Framework at the local clinic level for 58 family physicians in the primary care space. Participants asked if I could stay an additional 1-hour in dialogue (circle of 58 participants! To discuss the implications of social system patterns and leadership at the community-level.

2015 – Pacific Aids Network Annual Executive Director Conference – it was a pleasure to present to 60 Executive Directors from within the network to discuss partnership possibilities in lateral relationships in a network. Facilitated application of concepts of social system patterns related to networks rather than hierarchies of relationships.

2014 – BC Confederation of Parent Advisory Councils. Facilitated an Open Space forum at this conference involving 200 participants. Discussions centered on strategies for increasing parent participation in district leadership strategy development.

2014 – Canadian Society of Hospital Pharmacists Annual Conference. Facilitated a session for 90 participants who were pharmacists working in multidisciplinary settings, seeking to improve their collaborative practice capacity in social systems.

4. Governance and Committee Participation

While studying in the Doctor of Social Sciences program at Royal Roads University, I was afforded unique opportunities to apply my learning at a leadership and governance level in several different contexts as highlighted below.

2024 (2017-Present) – Expert Panel Member, Friday Night at the ER. I feel honored to participate as an expert panel member for the publisher of Friday Night at the ER. In 2017 I was invited to sit as a member of a panel of experts to answer questions related to use, research and value of the simulation. Part of my role as an expert panel member is to participate in new product development and testing, answer questions from new facilitators, train trainers, and be a general support for new and innovative applications of Friday Night at the ER in atypical settings.

2018 (2014-2018 Inclusive) – Board of Directors Vice Chair, Esquimalt Military Family Resource Centre. Elected to the board as a past service member providing direct input into strategic issues affecting service and support both locally and nationally, to current and retired service members.

2016 (2012-2016 Inclusive) – Royal Roads University Board of Governors. During this period I served as a student elected member of the Board of Governors. During my tenure I was able to significantly contribute to the University's decision to move programming delivery and partnerships to China by applying learning related to decision making and risk, including a framework for decision risk mitigation for Board discussion and consideration.

2016 (2012-2016 Inclusive) – Royal Roads University Program and Research Council. As mandated by the Royal Roads University Act, I contributed to this committee as a student-elected Board member. The Program and Research Council (PRC) advises the Board of Governors on instructional program and research priorities, program objectives and desirable learning outcomes.

2014 (2012-2014 Inclusive) Royal Roads University School of Leadership Studies Curriculum Review Committee. Lead by the school Director, I sat on this committee as an Associate Faculty where I advised and provided input into all aspects of the Master of Arts in Leadership program from start to finish.

2013 Royal Roads University School of Leadership Studies Assessment Sub-Committee. Lead by the school Director, I sat on this committee as an Associate Faculty where I advised and provided input into all aspects of competency-based learning outcomes and curriculum discussion the Master of Arts in Leadership program post-program redesign.

5. Education, Certifications, Accreditations and Advanced Practice

During the course of my studies in the Doctor of Social Sciences program, whenever I encountered subject areas that would enhance my own knowledge, self-awareness and capacity to help individuals and organizations achieve their objectives, I sought out advanced training and certification in the subject area. In directing my own learning in this way, I became a better facilitator, teacher and researcher through a deepened appreciation and understanding of leadership in complex settings. Accreditations and certifications achieved during my course of study are outlined below.

- Doctor of Social Sciences, Royal Roads University (2020)
- Master of Arts in Leadership and Training, Royal Roads University (1997)
- Bachelor of Social Work, University of Calgary (1994)
- Core Concepts Training Nuka South Central Foundation(2023)
- Cognitive Edge Practitioner – From the life's work of David Snowden: certification in leading methods related to complexity leadership and decision making.
- Leading and Managing a Future Search – methods and methodology from the work of Marvin Weisboard and Sandra Janoff in the field of whole systems transformation.
- Polarity Applications – Certified Polarity Management Practitioner based on the seminal work of Barry Johnson.
- Master Facilitator and member of the Power+Systems Leadership Integration Team (advancing the theory, spirit and methods of Barry Oshry's Organic Systems Framework).
- Master Facilitator and Expert Panel Member for "Friday Night at the Emergency Room" systems thinking simulation.
- Certified Systems Thinker – Plectica Institute (Cabrera)
- Certified Systems Leader – Plectica Institute (Cabrera)
- Certified Systems Mapper – Plectica Institute (Cabrera)

6. Courses Taught

In addition to my roles on the RRU Program Review Committee and the Curriculum Review Committee, I have been teaching the following courses at least twice annually in accordance with RRU's policy and practices. My studies in the Doctor of Social Sciences program have invariably made their way into the classroom through various activities, discussions, assignments and supervision of projects. Only courses taught during the period of study and PDF are included below. I have been teaching at RRU since late 1997.

RRU MAL (Healthcare Specialization 2022-2024): MAL 534 Consideration in Health System Renewal (researched, designed, developed and delivered).
RRU MAL (Classic and Healthcare Specialization 2012-2024): MAL526 Fundamentals Personal Leadership and Learning
RRU MAL (Classic and Healthcare Specialization 2012-2024): MAL527 Communication and Leadership in Groups and Teams
RRU MAL (Classic and Healthcare Specialization 2012-2024): MAL528 Leadership in Social Systems
RRU MAL (Classic and Healthcare Specialization 2012-2024): MAL626 Leadership for Organizational Change
RRU MAL (Classic and Healthcare Specialization 2012-2024): MAL627 Applied Methods for Organizational Leadership
RRU MAL (Classic and Healthcare Specialization 2012-2024): MAL628 Capstone Design
RRU MAL (Classic and Healthcare Specialization 2001-2024): MAL640 Capstone Supervision
RRU MBA (2013): BUSA 514 Organizational Behaviour

7. Publications

Undertaking the Doctor of Social Sciences program has afforded me the opportunity to apply my skills and learning, which have led to the following publications and contributions.

Cady, P. (2024, May). Partnership in care: Organic systems framework strategies for patients and care providers. In *Healthcare Management Forum* (Vol. 37, No. 3, pp. 183-186). Sage CA: Los Angeles, CA: SAGE Publications.

Cady, P., & Heykoop, C. (2024). Strengthening health system leadership in practice. In *Healthcare Management Forum*. Vol. 37, No. 3, pp. 128-132. Sage CA: Los Angeles, CA: SAGE Publications.https://doi.org/10.1177_08404704231209945

Cady, P. (2020, August). Applied systems thinking: The impact of system optimization strategies on financial and quality performance in a team-based simulation. In *Healthcare Management Forum* (p. 0840470420950378). Sage CA: Los Angeles, CA: SAGE Publications.

Cady, P. (2020). *Leadership and decision making in complex settings.* http://dx.doi.org/10.25316/IR-15007, Doctor of Social Sciences Dissertation, Royal Roads University

Cady P., & Devane, T. (2019). Organization workshop. In Holman, P., Devane, T., & Cady, S. (Eds) *The Change Handbook: The Definitive Resource on Today's Best Methods for Engaging Whole Systems*. (Publication Forthcoming) Berrett-Koehler Publishers.

Piggot-Irvine, E., L. Ferkins, and P. Cady. (2018). Goal Attainment Scaling in Action Research: Enhancing a Systems Thinking Orientation. *Systems Research and Behavioral Science* 35: 2. doi:10.1002/sres.2459.

Robinson, F., Piggot Irvine, E., Youngs, H., & Cady, P. (2018). Struggling to achieve desired results from your AR projects? insights from the Evaluative Study of Action Research may help. *Educational Action Research*, 1-20.

Sankaran, S., Rowe, W., & Cady, P. (2017). Developmental progress in conducting action research. *Systems Research and Behavioral Science*, 34(5), 609-617.

Cady, P. (2016). A system of system lenses for leadership decision-making. In *Healthcare Management Forum* (Vol. 29, No. 1, pp. 8-11). Sage CA: Los Angeles, CA: SAGE Publications.

8. Major Project, Thesis, and Doctoral Committee Participation

Doctoral Committee Participation (in-progress):

Joyce, J. (2020). *Inter-Agency Agreements in Learning and Development*. Doctoral of Social Science Program, Royal Roads University.
Tsai, M. (2020). *Leadership and augmented intelligence*. Doctoral of Social Science Program, Royal Roads University.
Quosai, H. (2020). *The Characterization of Dark Leadership: Workplace Bullying, Psychological Harassment or Office Politics?* Doctoral of Social Science Program, Royal Roads University.

Completed Thesis Committee Supervision and Participation (as noted)

Andrew, J. (2024). *The Significance of ʔamakʔis Ktunaxa.* (Master's Thesis, Royal Roads University (Canada)). (supervisor).
Korns, K. (2024). *Why Don't We Practice? Weaving Simulation into the Fabric of Quality Care.* (Master's Thesis, Royal Roads University (Canada)). (supervisor).
Sort, K., (2024). Cocreating Empowered Leadership Outcomes with Former Youth in Care in British Columbia. (Master's Thesis, Royal Roads University (Canada)). (committee member).
Harris, V., (2023). The Heart of the Matter: Nonpositional Leadership and Psychological Safety in Cardiothoracic Programs. (Master's Thesis, Royal Roads University (Canada)). (committee member).
Devitt, J. (2022). *Enhancing Diversity and Inclusion at Fair Vote Canada: Transforming Organizational Culture.* (Master's Thesis, Royal Roads University (Canada)). (supervisor).
Kelloway, M. (2022) Collaborative leadership Development (Master's Thesis, Royal Roads University (Canada)). (supervisor).
Evanow, L. (2020). *Increasing Inter-Community Collaboration in Pandemic Response in First Nations communities.* (Master's Thesis, Royal Roads University (Canada)). (Supervisor).
Hargreaves, I. (2020). *Creating a Safe-to-Fail Environment in Pre-Hospital Paramedic Care.* (Master's Thesis, Royal Roads University (Canada)). (Supervisor).
Holt, N. (2020*). Surviving and Thriving after Emotional Trauma in Policing.* (Master's Thesis, Royal Roads University (Canada)). (committee member).
Puddester, D. (2020). *Onboarding and integrating new leaders: A model for pandemic times.* (Master's Thesis, Royal Roads University (Canada)). (committee member).
Yohemas, S. (2020). *Revolutionizing Through Polarity Management* (Master's Thesis, Royal Roads University (Canada)). (committee member).

MA Leadership Capstone Project Supervision

The projects identified below are 12-credit (396-hour) Organizational Learning Capstone Projects as a partial requirement of the Master of Arts in Leadership at Royal Roads University. In these projects I was the academic supervisor, providing academic oversight, guidance and support. Studying in the Doctor of social Sciences program has contributed significantly to my ability to provide methodological oversight and academic supervision in the following projects:

Reid, F. (2020). *One Army: Decreasing Operational Silos at the Salvation Army in Edmonton.* Unpublished Master's Project; Royal Roads University.

Eslayer, E. (2020). *Establishing Trauma Education Strategy and Framework for Island Health Trauma Program.* Unpublished Masters Project; Royal Roads University

Bonin, P. (2019). *Enhancing employee engagement through improved internal communication mechanisms at Collège Boréal of Applied Arts and Technologies.* Unpublished Master's Project; Royal Roads University.

Lucas, R. (2019). *Enhancing Culture at the Regional District of the East Kootenays.* Unpublished Master's Project; Royal Roads University.

Sannes, D. (2019). *Leadership Development of the Senior Leadership Team at the Calgary Women's Emergency Shelter*. Unpublished Master's Project; Royal Roads University.

Arsovska, O. (2018). *Patient Leaders: A Pathway to Organizational Learning and Thriving*. Unpublished Masters Project; Royal Roads University.

Aubry, A. (2018). *The Tactical to Strategic PO1/WO and CPO2/MWO of the CAF.* Unpublished Masters Project; Royal Roads University.

Christianson, S. (2018) Engagement –*Your Story, Your Voice: Creating a Culture of Optimal Staff Engagement in the Public Health, Calgary Zone, Alberta Health Services.* Unpublished Masters Project; Royal Roads University.

Findlater, R. (2018). *Onboarding Experienced New Staff Nurses at St Boniface Hospital.* Unpublished Masters Project; Royal Roads University.

Groff, A. (2018). *Responding to the Opioid Crisis through Harm Reduction Outreach in Durham Region.* Unpublished Masters Project; Royal Roads University.

Hladysh, G. (2018). *Engaging Middle Management to Develop Leadership Capabilities.* Unpublished Masters Project; Royal Roads University.

Loo, C. (2018). *Fostering a Culture of Collaboration within Vancouver Coastal Health to Improve Inter-Facility Patient Repatriations to Improve Inter-Facility Patient Repatriations.* Unpublished Masters Project, Royal Roads University.

Paulson, A. (2018). *Enhanced Engagement of Virtual Teams*. Unpublished Masters Project; Royal Roads University.

Ristoff, T. (2018). *Fostering a Culture of Care & Safety At Shell Scotford*. Unpublished Masters Project; Royal Roads University.

Baker, S. (2017). *Enhancing Collaboration at RBC in Southern Vancouver Island.* Unpublished Masters Project; Royal Roads University.

Camilleri, C. (2017). *A Mental Health and Substance Use Services Transformational Leadership Framework for Patient-Centred Outpatient Care.* Unpublished Masters Project; Royal Roads University.

Given, B. (2017). *Mayor/City Manager Co-Leadership.* Unpublished Masters Project; Royal Roads University.

Luong, L. (2017). *Living Fraser Health's Values Out Loud through Employee Engagement.* Unpublished Masters Project, Royal Roads University.
Marran, E. (2017). *Enhancing Collaboration to Support Engagement at SAIT*. Unpublished Masters Project, Royal Roads University.
Rattenbury, C. (2017). *Strengthening Sergeant Capacity to Help Build a Culture of Employee Engagement in Port Moody Police Department*. Unpublished Masters Project; Royal Roads University.
Tingley-McLean, M. (2017). *Enhancing the Public Services Commission HR Service Delivery Model.* Unpublished Masters Project; Royal Roads University.
Bennett, C. (2016). *Transferability of Leadership Training at WestJet.* Unpublished Masters Project; Royal Roads University.
Bohl, S. (2016). *Optimizing How Island Health Directors Lead Change*. Unpublished Masters Project; Royal Roads University.
Braman, J. (2016). *Enhanced Ministry of Health Engagement Supporting Interior Health Organizational and Health System Objectives Achievement.* Unpublished Masters Project; Royal Roads University.
Leblanc, M. (2016). *Creating a High Performance Culture at the Northern Alberta Institute of Technology.* Unpublished Masters Project, Royal Roads University.
Marcoux, M. (2016). *Enhancing Undergraduate Student Leadership Development*. Unpublished Masters Project, Royal Roads University.
McFarlane, P. J. (2016). *Improving Organizational Performance through High Performance Teams at Habanero Consulting Group.* Unpublished Masters Project, Royal Roads University.
Blankenberg, I. (2015). *Port Coquitlam's Collaboration with Third Parties in a Disaster Recovery Plan.* Unpublished Masters Project; Royal Roads University.
Cioran, N. (2015). *Strengthening Shared Identity and Purpose: Organizational Alignment in Complex Environments.* Unpublished Masters Project; Royal Roads University.
Halsall, T. (2015). *Sustaining Enthusiasm and Employee Engagement after Two Years in the Accounting Profession.* Unpublished Masters Project; Royal Roads University.
Kowalska, E. (2015). *Employee Engagement: Increasing Employee Engagement to Support the Daily Management System at BC Women's Hospital Birthing Program.* Unpublished Masters Project, Royal Roads University.
Martell, T. A. (2015). *Supporting Nurses in the Implementation of iHealth.* Unpublished Masters Project, Royal Roads University.
Oas, M. (2015). *Building Collaborative Capacity for Beyond Boundaries*. Unpublished Masters Project; Royal Roads University.
Prescott, J. (2015). *Regional Engagement for The British Columbia Green Party.* Unpublished Masters Project; Royal Roads University.
Singh, R. (2015). *Increasing Volunteer Engagement in the Punjabi Renal Community for Organ Donation Awareness.* Unpublished Masters Project; Royal Roads University.
Ednie, H. (2014). *Global Mining Standards and Guidelines Group: Volunteer Engagement in a Virtual Organization.* Unpublished Masters Project; Royal Roads University.

Eng, M. (2014). *Improving Organizational Performance through a Focus on Quality Management.* Unpublished Masters Project; Royal Roads University.

Forester-Smith, S. (2014). *Open Doors: Embracing Nursing Students and Positioning Them for Success in the Winnipeg Regional Health Authority.* Unpublished Masters Project; Royal Roads University.

Gasparotto, M. (2014). *Experiential Learning in The Canadian Army: Evolving from a Training to a Learning Organization*. Unpublished Masters Project; Royal Roads University.

Lam, F. (2014). *Enhancing Effectiveness: the Residence Life Management Team at the University of British Columbia.* Unpublished Masters Project, Royal Roads University.

Michaud, B. (2014). *Ensuring functioning succession planning for the air operator superintendent occupation.* Unpublished Masters Project; Royal Roads University.

Neuwelt, B. (2014). *Engaging Staff in Initiating and Sustaining Change.* Unpublished Masters Project; Royal Roads University.

Noftall, J. (2014). *Beyond Fundraising: Why leadership development matters at the University of British Columbia.* Unpublished Masters Project; Royal Roads University.

Powell, R. (2014). *Transitioning into the 21st Century: An Inquiry into How to Engage the SIR Community.* Unpublished Masters Project; Royal Roads University.

Peljhan, M. (2013). *Mentorship in the Victoria General Hospital Emergency Department.* Unpublished Masters Project; Royal Roads University.

Thompson, C. (2013). *Enhancing Employee Engagement at Thompson Rivers University's International Division*. Unpublished Masters Project; Royal Roads University.

Watson, E. (2013). *Enabling Patient-and-Family-Centred-Care at North York General Hospital.* Unpublished Masters Project; Royal Roads University.

Abela, C. (2013). *Health Integration Strategies for Emergency Medical Services.* Unpublished Masters Project; Royal Roads University.

Gmistroski, S. (2013). *Enhancing a Culture of Interprofessional Collaborative Practice*. Unpublished Masters Project; Royal Roads University.

Baker, K. (2012). *A Model of Enhanced Collaboration: A Transformation in Long Term Care.* Unpublished Masters Project; Royal Roads University.

Coleman, G. (2012). *Fostering Collaboration in an Interprovincial Health Care Service Area.* Unpublished Masters Project; Royal Roads University.

Collins, T. (2012). *Optimizing Engagement through Orientation in the NC Ministry of Health*. Unpublished Masters Project; Royal Roads University.

Jones, A. (2012). *Enhancing Organizational Culture to Improve Patient Outcomes.* Unpublished Masters Project, Royal Roads University.

McRae, B. (2012). *How can the Brenda Strafford Foundation Ltd. Integrate its Culture of Excellence into New Acquisitions?* Unpublished Masters Project; Royal Roads University.

Toledo, E. (2012). *The Craft of Co-Developing Collaborative Relationships within the Southern Alberta Institute of Technology.* Unpublished Masters Project; Royal Roads University.

9. Sample of Other Relevant Research Contributions

The Doctor of Social Sciences program has increased my critical thinking and assessment abilities across many different contexts and initiatives. A few such projects and professional contributions to client work are outlined below.

Cady, P. (2013). *Pacific Rim Action Research Impact Analysis Literature Review.* Unpublished Literature Review.

Cady, P. (2012). *Canadian Forces Joint Task Force North Community Needs Assessment.* Unpublished Research Report.

Cady, P. (2012). *Government of Northwest Territories Enterprise-Wide Competency Framework Research, Design, Development and Enterprise Implementation.* Research Report and Policy Paper.

Cady, P. (2012). *The Value of Integration.* Presentation and Paper Presented to the International Organization Development Association Annual Conference, SunPeaks, BC, Canada.

ZOË MACLEOD, PhD, CEC, ACC

zoe.macleod@royalroads.ca

RELEVANT FORMAL EDUCATION

PhD, Organization Development and Change **2018**
Thriving in Higher Education: Coaching Women Leaders
Fielding Graduate University, Santa Barbara, CA

Institute for Social Innovation **Award Recipient – 2010**
Institute for Social Innovation **Award Recipient – 2007**

Graduate Certificate in Executive Coaching **2012**
Certified Executive Coach (CEC) and ICF Associate Certified Coach (ACC)
Royal Roads University, Victoria, BC

Master of Arts, Human Development **2010**
Sustainability and Leadership in the Age of Integration
Fielding Graduate University, Santa Barbara, CA

Master of Arts, Leadership and Training **2005**
Leveraging Collaboration
Royal Roads University, Victoria, BC

RELEVANT EXPERIENCE

Royal Roads University, Victoria, BC 2001 – Present

Associate Vice President
Professional and Continuing Studies | Global Partnerships and Business Development – Present
Director, Professional and Continuing Studies
Director, Centre for Coaching and Workplace Innovation
Program Manager and Research Coordinator, Centre for Health Leadership and Research
Executive Programs, School of Leadership Studies
Technical Training/Systems Analyst, Academic and Information Services

ADDITIONAL RELEVANT PROFESSIONAL EXPERIENCE

Executive Coach, Canadian Centre for Advanced Leadership in Business
University of Calgary, Calgary, AB, 2015-2016
Executive Coach, Government of Alberta
Human Resources, Edmonton, AB, 2015

BOARDS AND COMMITTEES

Canadian Health Leadership Network – Partner/Member **2010 – Present**

- Wise Practices Leadership Development Toolkit (2022)

International Coaching Federation's Coaching Education Accreditation Advisory Committee **2024 – Present**

- Vice-Chair (2024)

International Coaching Federation's Coaching Education Global Board of Directors **2020 - 2024**

- Chair (2022-Present)
- Vice-Chair (2020, 2021)

BC Government Prior Learning Assessment Micro-Credential Task Force **2022 - 2023**

BC Campus Micro-Credential Advisory Group (Competency Working Group) **2022 - 2023**

SIPP Rising Economy Committee on Education and Skills Development **2020 - 2021**

Fraser Health Centre of Excellence in Healthcare Leadership, BC **2019 - 2021**

Organization Development Network, Washington, DC, **2014 - 2016**

- Board of Trustees, Executive Committee, VP, Strategy and Growth

Vancouver Island Social Innovation Zone, Victoria, BC **2015 - 2017**

- Member, Strategy Planning Working Group, Present
- Member, Community Engagement, Present

Leadership Victoria, Victoria, BC **2011 – 2017**

- Victoria Leadership Awards, Selection Committee – 2011 – 2017
- Leadership Victoria Awards, Steering Committee – 2011 - 2013

Association of Coach Training Organizations

- Member, Cultural Competency & Diversity Committee – 2014-2015

BC Leadership and Management Institute **2007 - 2013**

- Member, Steering Committee – Camosun College, University of Victoria, Royal Roads University

Continuing Education & Training Association of BC (CETABC), Victoria, BC **2010**

- Board Member

PROFESSIONAL DEVELOPMENT AND ACTIVITIES

Relevant and Recent Development

2023 European Association for International Education (EAIE) – Rotterdam, NL
2022 American Society of Association Executives (ASAE) Annual Meeting & Exposition – Nashville
2021 ICF Thought Leadership Institute, Wisdom Weaver – Future of Coaching
2021 American Society of Association Executives (ASAE) CEO Symposium
2020 American Society of Association Executives (ASAE) Exceptional Boards Training

Recent Presentations:

- Taylor Institute's Conference on Post-Secondary Teaching and Learning - *Students as partners: Developing teaching cases from student EDIA research,* April 2024
- UPCEA Annual Conference, Boston MA - *From Learning to Impact: Harnessing Micro-Credentials for Social Change* - Boston, MA March 27, 2024
- Ashoka's Changemaker Education Research Forum - *From Learning to Impact: Harnessing Micro-Credentials for Social Change* Feb 29, 2024
- BCcampus - *Micro-credential Toolkit Story Spotlight: Design* – Feb 8, 2024
- World Bank, International Finance Group, November 2022 – *Micro-credentials: Remaining Relevant in a Changing World*
- Imagine 2022, International Coaching Federation, *State of Coaching Education,* October 2022
- Cannexus 2022, Canada's Career Development Conference, January 2022 - *PrePAIR for the Future of Education: Partnerships Required*
- BC Career Development Association, April 2022 – *Perfect Pairings in Micro-Credentials: Best Practices for the Future of Rapid Upskilling*
- GLOW-ED, December 2021 - *Impact of Coaching for Women Leaders*

- Symposium on Learning Transformation, Terrace BC, October 2019 - *Bridging Experiences with Indigenous Communities: Experiential and Place-Based Learning in Northwest BC*.
- International Leadership Association, Santa Cruz, CA, June 2019 - *Thriving in Higher Education: Coaching Women Leaders*
- BC Health Leaders Conference, Victoria, BC, October 2017 - *Coaching Lab: Building Capacity in Health Leadership*
- Royal Roads University, Victoria BC, April 2016, *Collaborative Learning Design: Creating a Culture of Collective Responsibility*
- Ashoka Exchange, New Orleans, LA, Feb 2016, *Multi-university Collaboration: Accelerating Impact*
- Conference on Management and Executive Development, Phoenix, AZ, November 2015 (accepted, not able to attend) - *The Power of Collaboration: New Models for Corporate Learning*
- International Association of Business Communicators World Conference, San Francisco, CA, June 2015 - *From the Olympics to the C-Suite: Coaching for High Performance Using Olympic Principles and the Gold Medal Standard*
- International Leadership Association, Monterrey, CA, June 2015 - *Advancing a Feminine Culture of Leadership: Leading the Whole Organization*
- Canadian Conference on Physician Leadership, Vancouver, BC, April 2015 - *Advancing a Feminine Culture of Leadership*

PROFESSIONAL AFFILIATIONS AND MEMBERSHIPS

- Association of Change Management Professionals (ACMP)
- Canadian Association of University Continuing Education (CAUCE)
- Canadian Health Leadership Network (CHLNet)
- Chartered Professionals of Human Resources BC & Yukon (CPHR)
- International Coaching Federation (ICF)
- Project Management Institute (PMI)
- Online and Professional Education Association (UPCEA)

7. MOU and Intern Consent

7.1 Mitacs Elevate Memorandum

The participants listed below confirm that the information presented accurately reflects their intention to apply to the Mitacs Elevate program. The participants have also agreed to set in place an internship based upon the attached proposal. The participants acknowledge that they have read, understood and agreed to abide by and uphold the Project Responsibilities applicable to each of them, available for reference at http://www.mitacs.ca/en/programs/elevate/project-responsibilities which include and are not limited to the following: it is understood that the partner organization contribution shall be provided to Mitacs Inc. in Canadian dollars prior to commencement of the internship; in the event that the sponsor organization funds are at the academic institution, the academic institution shall forward these funds to Mitacs. Upon research approval and the receipt of the partner funds at Mitacs, Mitacs shall forward the funds to the Canadian academic institution as a research grant to the Canadian supervising professor, and the internship stipend/salary will be paid to the student by the academic institution from the grant. Costs associated with this proposal as outlined in the budget can only be incurred after research approval of the proposal and the receipt of the partner funds at Mitacs.

Mitacs is unable to assume liability for any losses including—but not limited to—accidents, illness, travel, or other losses that may occur during the internship period. All undersigned parties agree that they are responsible for ensuring that they have appropriate insurance and meet any institutional policies regarding health, safety, and travel preparation requirements. All parties also agree that the intern will provide Mitacs with a final report and that all participants will complete an exit survey within one month of project completion.

All parties involved with Mitacs Elevate are bound by the standard intellectual property (IP) terms of the academic institution where the intern is enrolled; except where intellectual property is covered by separate agreements to which the academic institution(s) and the sponsor organization are parties and that are active during the dates of the internship. By signing this memorandum, if you have separate agreements covering IP between you and the academic institution, you are acknowledging that you are bound by their specific terms and conditions. Otherwise, if you don't have separate agreements, you are bound by the standard intellectual property terms of the academic institution, and by signing this memorandum you agree to the terms of the academic institution where the intern is enrolled. Institution-specific IP policies regarding Elevate internships can be found at https://www.mitacs.ca/en/programs/elevate/faq.

The participants also agree that Mitacs will post the title of the project, the public project overview, the name of the partner(s) organization(s), the name of the intern(s), the name of supervisor(s) and the involved academic institution on www.mitacs.ca/en/projects and may be used by Mitacs to publicize Mitacs Elevate. Mitacs Privacy Policy can be found at www.mitacs.ca/en/privacy-policy.

Mitacs does not require, inspect, or enforce any additional terms as outlined by participants beyond this memorandum.

If there are any addendums required by Internship participants (intern, supervising professor, and partner) please contact your Business Development representative contact to attach this with your submission

7.2 Intern Consent Form

USE AND DISCLOSURE OF PERSONAL INFORMATION PROVIDED TO MITACS

1. All personal information collected is subject to privacy legislation and Mitacs Privacy Policy for Program Participants. For a description of Mitacs' commitment to protect the personal information provided by program applicants, please see www.mitacs.ca/en/privacy-policy .

2. All the information supplied in this application will be made available to Mitacs staff responsible for managing the application, for activities including identifying appropriate peer reviewers, administering and monitoring awards, compiling statistics, and evaluating the program.

3. Information supplied in this application will be made available to internal and/or external reviewers, being composed of experts recruited from the academic, public and private sectors. All reviewers are required to commit to keep the application information confidential.

4. Contact information in this application may be used by Mitacs staff to contact you in future for:
a. Invitations to be profiled in stories or news items, to speak at or attend events, to provide a spotlight story and/or blog post;
b. Communications about opportunities for Mitacs alumni; and
c. Research surveys for Mitacs alumni. You will have the opportunity to unsubscribe from emails sent to you, once all commitments regarding the internship that is the subject of this application are complete.

5. Your name, academic institution and department, and the title of your project may be provided to the federal, provincial and academic institution funders of the program, to:
a. Enable Mitacs to report on funding contract commitments; and
b. Allow the funders to evaluate the program.
Note that all Canadian provincial and federal governments, and academic institutions, are bound by privacy legislation and are therefore bound to keep your personal information confidential.
Additional information, such as passport numbers and dates of birth, may be provided to the international funders of the program (if applicable), for adjudication and reporting purposes.

6. Your name, contact information, and other personal information as required may be provided to the academic institution(s) participating in the internship to enable the academic institution(s)to manage the award, to sign off on the pre-departure form (if applicable),and for reporting purposes.

8. Sign-off Status

8.1 Intern (approvals below also indicate acceptance of the MOU and Consent as seen in section 7 of the report)

Name	Status	Date/time	Sign-off Notes
Phil Cady	approved	2024-08-06	

8.2 Academic Supervisors

Name	Status	Date/time	Sign-off Notes
Zoe MacLeod	approved	2024-08-06	

8.3 Partner Organization

Name	Status	Date/time	Sign-off Notes
Brenda Lammi	approved	2024-08-07	
Graham Dickson	approved	2024-08-06	
Kelly Grimes	approved	2024-08-06	

8.4 Office of Research Services Approval Template

Project: LEADS in a Caring Environment Framework Refresh

Personnel from each participating university belonging to the Office of Research Services (or equivalent) must review and approve this project.

Please print out this page for each university for which there is an academic supervisor on this project.

For example, if there are three supervisors from University of Toronto and one from UBC then we need to print one sign off page for University of Toronto and one for UBC.

The professor responsible to execute this project must collect all these signatures, scan each signed page and upload them to the ORS section of the Mitacs RAP submission page. **Only upload this signature page please.**

_____	_____
(Print the name of the University above)	**(Print the name of the ORS reviewer or equivalent)**
_____	_____
(Signature here with heavy ink pen as this will be scanned)	**(Print the date of the signature above)**